

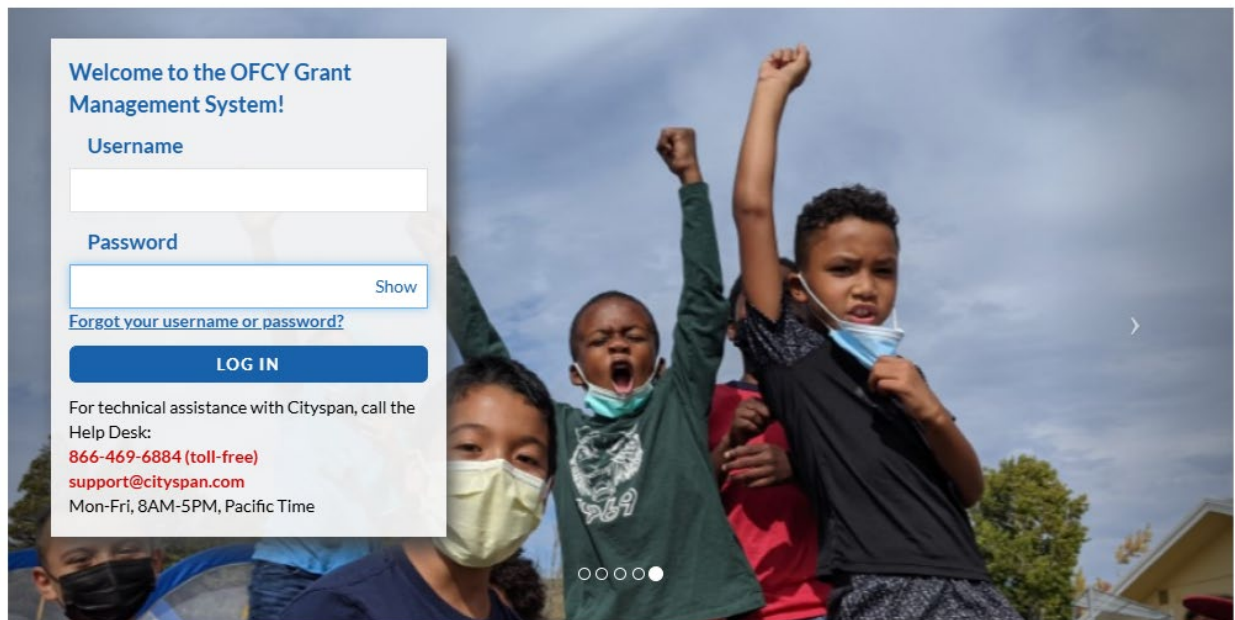


# OAKLAND FUND FOR CHILDREN & YOUTH \*cityspan Quick User Guide

## Getting Started



Oakland Fund for Children and Youth  
Grant Management System



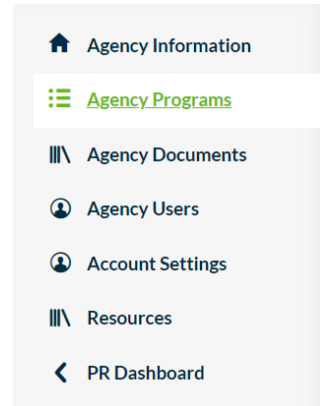
### Logging in:

1. Log in to your [Cityspan account](#).
  - a. The Proposal Contact listed in the RFP program application have had user accounts at the Agency Admin role created for them. This person should create accounts for all those who will be working on the program. More information on user types can be found in the Agency Users section.
2. Click on the program you want to setup, access, or update. If you have more than one funded program, all will appear on this page.

Cityspan is available for Technical Assistance by phone at 866-469-6884 or by email at [support@cityspan.com](mailto:support@cityspan.com).

## Agency Users

There are three different user types: Agency Admin, Program User (SOW & Services) and Program User (Services Only). The Agency User page is found on the left-side menu under Agency Programs.



### Each Cityspan User Role has the following permissions:

- Agency Administrator:
  - Has access to everything in the system for all programs funded under an agency.
  - Only user role that can Submit the Agency Documents and Scope of Work, Sign Off Progress Reports, and create and manage User Accounts.
- Program User (SOW & Services):
  - Can be given access to one or more programs funded under the Agency.
  - Can work on and submit individual SOW forms (Program Information, Budget, Service Projections, Populations & Geography), Agency Documents, and Quarterly Progress Report forms (Narrative, Stats, Invoice, Match Report) but cannot Submit.
  - Cannot create or manage User Accounts.
- Program User (Services Only):
  - Can be given access to one or more programs funded under the Agency.
  - Only has access to Participants, Activities, Locations.

### Creating New Users:

A screenshot of the 'USER ACCOUNTS' page. It features a 'SHOW INACTIVE USERS' button, a 'Role Descriptions' link, and a 'CREATE A NEW USER' button. Below these is a form with five columns: User Name, Email, First Name, Last Name, and Role. The Role column has a dropdown arrow. A 'CREATE A NEW USER' button is located at the bottom right of the form.

Each staff member responsible for OFCY programming should have access to Cityspan via a user account. An Agency Administrator should create user accounts for each person on staff who will be involved in reporting, scope of work development, or recording service hours.

1. Navigate to **Create A New User** on the Agency Users page.
2. Update the following fields:
  - a. User Name
  - b. Email
  - c. First Name
  - d. Last Name
  - e. Role – use the dropdown menu to select the correct role type from the options above.
3. Click the **Create a New User** button. The login information will be sent to the email address.

From this Menu, you can also:

- Reset Passwords: Use the **Resend** button under **Resend Login** to reset a user's password.
- Deactivate Users: Use the dropdown menu under the **Role** column and select **Inactive**. Update the applicable section by clicking **Update [Section] Roles**.

## Agency Documents

Vendors will use Cityspan to manage the documents needed for contracting with the City of Oakland via **Agency Documents**. The City of Oakland requires several documents and pre-approvals as part of the contracting process, including Insurance (Schedule Q).

| Indicates required fields or invalid data.

**GRANT AGREEMENT**

[Grant Agreement](#) i

File

**CHOOSE FILE**

### Grant Agreement:

The first year of each grant cycle, the Grant Agreement will be available for the agency to review and sign. It can be accessed via the Agency Documents page by clicking on the **Grant Agreement** link under the heading. Prior to signing and uploading, please make sure the following are correct:

- The California Corporation Number
- Your City of Oakland Business Tax Number (found on your annual business license)
- Funding amount, especially if your agency is funded for multiple programs and consolidated into one agreement.

Once these items have been verified, the Grant Agreement or Amendment must be signed and dated by a Signatory (e.g. Executive Director, Chief Executive, etc.), and uploaded by clicking the **Choose File** button.

Scope of Work: This section is completed from the **Agency Programs** page. If your agency has

**INSURANCE REQUIREMENTS**

[Schedule Q Insurance Requirements](#)

**Insurance Checklist**

**Insurance Checklist**

General Liability Insurance (\$2,000,000 each occurrence)

Additional Insured Endorsement for General Liability Insurance (Naming "The City of Oakland, its Councilmembers, directors, officers, agents, employees and volunteers" as insured under the Commercial General Liability policy)

Sexual/Abuse insurance (\$1,000,000 each occurrence and \$1,000,000 in the aggregate). Required for all contractors who will have contact with persons under 18 years old.

Automobile Liability Insurance (\$1,000,000 each accident) or waiver request if not applicable.

Workers' Compensation (\$1,000,000 each accident)

Waiver of Subrogation Certificate for Workers' Compensation Insurance (Contractor waives all rights against "The City of Oakland and its Councilmembers, officers, directors, employees and volunteers")

All checklist items must be selected to indicate acknowledgement.

**Insurance File**

File

**CHOOSE FILE**

more than one program, all SOWs must be submitted and approved for this section to be complete. Step by step instructions can be found in the following section.

Schedule Q – an agency's insurance documents must be approved by the City of Oakland's Risk Management Division. If updates are needed, your Grant Manager will communicate with your agency. Check each of the boxes once you've ensured the section is present in your certificate of insurance, then upload the certificate or

**ADD AN INSURANCE DOCUMENT**

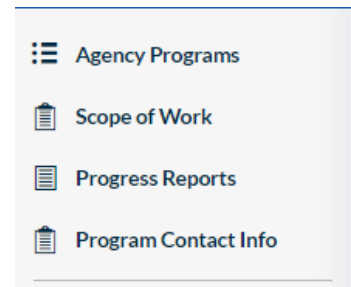
certificates by selecting **Choose File**. If additional files are needed, click the **Add an Insurance Document** button.

Current Business Tax License - Upload the current business tax license by clicking the **Choose File** button. As the Fiscal year covers two calendar years (July-Dec, Jan-June), your Grant Manager may request an updated copy via email.

Once all documents have been uploaded, click the **Submit** button at the bottom of the page.

## Program Contact Information

There are three required roles to complete within Cityspan: Executive Director/CEO, Contract Representative, and Program Representative. All contacts included within Program Contact Information should be prepared to respond to outreach from your grant manager. *Program Contact Information is added at a program level. If your agency has multiple projects or programs, you are required to complete this process for each of your programs.*



- Executive Director / CEO – This Individual must serve as the Signatory that will sign the grant agreement and approve the quarterly progress reports. If there is a fiscal sponsor, the Executive Director of the fiscal sponsor should be listed.
- Contract Representative – This individual must be an employee of the contracting agency/fiscal agency and have the authority to negotiate scopes of work, budgets, and complete contracting documents. This individual will receive all OFCY updates and information and has the responsibility to forward the communication to the appropriate program staff and to communicate directly with OFCY Staff.
- Program Representative - This individual is responsible for program implementation and can answer any program specific questions. This individual will receive all OFCY updates and information, has the responsibility to forward the communication to the appropriate program staff as well as to communicate directly with OFCY Staff

### Adding Program Contact Information:

1. Select **Program Contact Information** from the left-hand menu.
2. Add the Executive Director/CEO, Contract Representative and

### PROGRAM CONTACT INFORMATION

◀
📄
SUBMIT

Demo 1 - Program 4

**Executive Director/CEO** ⓘ

First Name	Last Name
Test	Testson
Phone	Email
PhoneNumber	TTestson@Grantee.org

**Contract Representative** ⓘ

First Name	Last Name
Test	McTest
Phone	Email
PhoneNumber	TMcTest@Grantee.org

**Program Representative** ⓘ

First Name	Last Name
Test	O'Test
Phone	Email
PhoneNumber	TOTest@Grantee.org

Program Representative. *Please make sure this is accurate as your Grant Manager will need to rely on this information to ensure we are contacting the correct people.*

3. *Optional:* If your program has additional contacts, select **Yes** under the question “Do you have additional contacts to add?” Use the **Add An Additional Contact** button to add multiple additional contacts.

Add your organizational mailing address from iSupplier. If this section changes during the program year, please note that changes must also be made in iSupplier. Once all required fields are completed, click **Submit** at the top of the page. More information on iSupplier can be found in the OFCY Grantee Manual.

## Scope of Work

Scope of Work forms are the basis of the grant agreement in which you enter with the City of Oakland. Scopes of Work are initially populated from the corresponding sections of your agency’s request for proposal (RFP) but should be updated prior to entering into a contract. After these sections are developed, they are submitted to and approved by your Grant Manager. Grantees will receive an email once their SOW has been approved or rejected. If a SOW has been rejected, the Grant Manager will include a note explaining the reason. Emails will be sent from [noreply@cityspan.com](mailto:noreply@cityspan.com).

### Scope of Work – Program Information

Review and complete this page to make sure that it accurately describes the OFCY funded program. Please note that any significant changes to program design, delivery, or targets should be discussed with your Grant Manager prior to implementation. The following information is collected on this page:

- Funding Strategy
- Program Service Term
- Program Name
- Applicant Type
- Program Summary

**PROGRAM INFORMATION** **SUBMIT**

**Summer 2026**  
Sample Organization 1 - Summer Test 1

**OFCY Funding Goals & Strategies**

**Funding Strategy**  
Mayor's Summer Youth Employment Program

**Program Service Term**  
 Summer  Year-round

**Overview**

**Program Name**  
Mayor's Summer Youth Employment Test Program

**Applicant Type**  
Single Agency

**Program Summary**  
Use this field to share more about program delivery and goals, client demographics, and other important programmatic information.

Use the floppy disk image to save progress and the **Submit** button to lock your agency’s submission.

Scope of Work – Population and Geography

The City of Oakland is working to ensure Oaklanders from all communities are equitably supported by programming. More information on Oakland’s Race and Equity work can be found within the [Department of Race and Equity](#).

**POPULATION AND GEOGRAPHY** ← 📄 SUBMIT

Summer 2026

Sample Organization 1 - Summer Test 1

**YOUTH PARTICIPANTS** ⓘ

Total Number of Unduplicated Participants ⓘ

10

The Population and Geography form projects the total number of clients a program aims to serve during the program term. These projections should only include participants eligible for OFCY programming your agency plans to enroll through Cityspan. Do not include in your projections participants that only receive ancillary services such as sitting through a one-time workshop. Do not include projected number of participants reached in outreach efforts. This page should include geographic and demographic projections for service delivery, broken into the following categories:

- Total Number of Participants
- Projected Number of Participants by Age, Race/Ethnicity, Gender Identity, and Zip Code

Please refer to the Grantee Manual for more on OFCY’s eligibility, enrollment and file management standards. Add service locations underneath this section. If you are **only** providing virtual services, please include the address of your agency headquarters.

**SERVICE SITE LOCATIONS** ⓘ

Location (1)

Service Site Name ⓘ	Service Site Type	City Council District (Lookup)	
Testing School	OUSD 6-12	1	
Street Address	Apt/Suite	City	Zip Code
123 Main St		Oakland	94601

**ADD A SERVICE SITE LOCATION**

Scope of Work – Service Projections

**Service Hours Projections** ⓘ

Only project services from June 1, 2026 to September 30, 2026.

**Service Hours Projections (1)**

Service Name

Testing Place

Please select days in a typical week that your program will provide services.

Sunday  
 Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday  
 Saturday

Projected Start Date: 06/01/2026 📅      Projected End Date: 09/09/2026 📅

Projected # youth served	Projected Average Hours of Participation per Youth ⓘ	Total Service Hours - Youth
10	10.00	100

Calculation ⓘ

10 youth x 10 hours = 100

Service Description

testing place offers services...

This section specifies program implementation and the anticipated service hours for each youth participant. Include specific projections for each project component.

Youth Participants Service Intensity: Use this table to describe overall service delivery hours for projects under your OFCY programming. The total participants on this page should match the projection entered in the Population & Geography section.

Service Hours Projections: Outline the services provided by your OFCY funded program. These activities may be individual or group activities. Grantees must create projections for each service

or activity for the program, even if the activity or service is not mandatory for program completion. Use the **Add Service Projection** button to add additional services. To complete an activity projection, ensure each field is filled out completely. If an activity is offered multiple times, such as part of a cohort model, the service can be added one time but should include service projections for the entire service term. (E.g. Pre-Employment training offered quarterly with a goal of 10 youth per class would include a projection of 40 youth served.)

Once this section is complete, use the **Submit** button to lock your agency's submission.

Scope of Work - Budget

Please provide the entire program budget, highlighting where grant funds will be used. This submission will be the basis for your invoices and determine the level of match required.

BUDGET SUMMARY			
Item	Total Program Cost	OFCY Request	% of Total Program Cost
Personnel	\$100,000.00	\$58,000.00	58.0%
Other Direct Costs	\$2,000.00	\$1,000.00	50.0%
Youth Wages	\$40,000.00	\$30,000.00	75.0%
Youth Stipends	\$10,000.00	\$10,000.00	100.0%
Subcontractors	\$2,000.00	\$1,000.00	50.0%
Indirect Costs	\$10,000.00	\$0.00	0.0%
<b>Total</b>	<b>\$164,000.00</b>	<b>\$100,000.00</b>	<b>61.0%</b>

The budget summary is added automatically as each section is completed. This table will include the Total Cost, by category and total; the OFCY request, as provided by your agency; and the percentage of the Total Program Cost.

Each detail line should include a narrative justification for each item. Budget Justification and Calculation statements should describe the specific item, how the amount shown in the budget was calculated, and how it contributes to program delivery.

Personnel: Please list all direct service staff including line staff, supervisory staff that supervise line staff, and support/clerical staff responsible for the success of the project, even if salaries or wages are being covered by matching funds. **Do not** include administrative staff not providing direct supervision of line staff, subcontractors, interns, or volunteers.

Personnel (3)					
Staff Role	First and Last Name	Total Annual Salary/Wages	% Time on proposed program	Total Program Cost	OFCY Request
Case Manager	Test O'Test	45000.00	88.9%	40000.00	8000.00
Budget justification and calculations					Testing 3
<b>Staff Subtotal</b>				<b>\$90,000.00</b>	<b>\$58,000.00</b>
<b>ADD PERSONNEL</b>					
			Fringe Rate	Total Program Cost	OFCY Request
Fringe Benefits			11.1%	10000.00	0.00
Budget justification and calculations					N/A
<b>Staff and Fringe Subtotal</b>				<b>\$100,000.00</b>	<b>\$58,000.00</b>

staff, and support/clerical staff responsible for the success of the project, even if salaries or wages are being covered by matching funds. **Do not** include administrative staff not providing direct supervision of line staff, subcontractors, interns, or volunteers.

Create a separate line item for each staff member working directly on the program that includes Staff Role, First and Last Name, Total Annual Salary/Wages, Total Program Cost, OFCY Request, and Budget

Justification and Calculations. The percentage of Time on Proposed Program will be calculated automatically. If roles are repeated, please number each funded role (e.g. After School Instructor 1, After School Instructor 2, etc). Include fringe benefits for all staff roles. The total fringe amount is only for those personnel receiving benefits from your agency. In the Budget Justification and Calculation,

provide a clear response explaining how your agency calculates Fringe and Benefits, and what is covered.

Other Direct Costs: All items listed must directly benefit and support the operation of the proposed program. Please ensure the cost is calculated and justified in the narrative section. Direct costs that support the program include:

- Communications
- Field Trips
- Food
- Occupancy
- General Office Supplies
- Participant Incentives
- Professional Development
- Program Materials
- Travel
- Utilities
- Other: other items must be specified and identified, and justifications for program use must be clear.

Other Direct Costs ⓘ			
Other Direct Cost (1)			
Item	Item - other	Total Program Cost	OFCY Request
Field Trips		2000.00	1000.00
<b>Budget justification and calculations</b>			
			testing
<b>Other Direct Costs Subtotal</b>		<b>\$2,000.00</b>	<b>\$1,000.00</b>

[ADD OTHER DIRECT COST](#)

Subcontractors: Subcontractors are described as organizations or individuals/sole proprietors that

SUBCONTRACTORS				
Subcontractor (1) ⓘ				
Contractor Name			Total Program Cost	OFCY Request
Test Contractor			2000.00	1000.00
Email Address	Phone Number			
Test@Test.org	555-555-5555			
Street Address				
123 Fake Street				
City	State	ZIP Code		
Fake	FA	94561		
Proposed services and activities				
Description of Services provided by contractor				
Budget justification and calculations				
			\$1,000 will be covered by matching funds	
<b>Subcontractors Subtotal</b>			<b>\$2,000.00</b>	<b>\$1,000.00</b>

[ADD SUBCONTRACTORS](#)

provide specialized services to target populations to help enhance your programs. Each subcontractor must operate under a signed contract, MOU, or LOA. Subcontractors should meet the same contracting requirements of the City of Oakland that are required of lead contracting agency. Any potential changes in subcontractors, scope of work and budget should be brought to OFCY's attention before implementation.

List the organization or individual name of each subcontractor or consultant in this section. For each subcontractor, enter a line-item budget using the same guidelines as the lead applicant budget.

All detailed subcontractor budgets must be submitted before the main budget form can be submitted.

Youth Wages: This line item is for programs that offer youth an hourly wage for internships or employment experiences. Please enter a separate line item for each unique hourly wage. **Do not** enter a range for wages. Provide a simple job description and how the cost was calculated. Youth wages must be at least minimum wage.

Make sure this section includes the number of youth projected for the role, the hourly wage, hours per week and weeks per year, the total program cost, the OFCY ask, and a clear budget explanation. Fringe costs should also be included in this section. Enter the total amount of fringe benefits associated with employing youth including any benefits youth may receive and mandatory employment costs such as FICA, SDI, and UI. Each job role/pay-rate should have its own line.

Youth Wages <span style="float:right">i</span>					
Youth Wages (1)					
# of youth	Hourly Wage	# Hours/ week	# Weeks/ year	Total Program Cost	OFCY Request
10	20.00	20.00	10.00	\$40,000.00	30000.00
Budget justification and calculations					
10 youth will work 200 hours at a wage of \$20/hr TEST					
Youth Wages Subtotal				\$40,000.00	\$30,000.00
<a href="#">ADD YOUTH WAGES</a>					
				Total Program Cost	OFCY Request
Fringe Benefits				0.00	0.00
Budget justification and calculations					
TEST					
Youth and Fringe Subtotal				\$40,000.00	\$30,000.00

Youth Stipends: Stipends are used to support youth participants enrolled in your program in limited duration work experience and internships. Please enter a separate line for each unique stipend profile and stipend amount. **Do not** enter a stipend range. Provide a description of what the internship or stipend structure is, and how the cost was calculated. **Do not** include

Youth Stipends <span style="float:right">i</span>					
Youth Stipend (1)					
# of youth	Stipend Amount	# Hours/ week	# Weeks/ year	Total Program Cost	OFCY Request
10	1000.00	20.00	10.00	10000.00	10000.00
Budget justification and calculations					
stipend award for program completion.					
Youth Stipends Subtotal				\$10,000.00	\$10,000.00
<a href="#">ADD YOUTH STIPEND</a>					

incentives for program participation in this line item (these are considered Direct Costs). Include the number of youth projected to receive this stipend, the hourly rate, number of hours per week, weeks per year, the total program costs, the OFCY ask and a clear budget explanation. Each stipend should have its own line.


Indirect Costs: These are other costs that are accrued as a part of program development and delivery. Administrative and indirect costs cannot exceed the limits stated above, including subcontractors. Examples of allowable expenses include audit, bookkeeping, payroll or finance, facilities maintenance, fiscal sponsor costs, insurance, rent, storage, utilities, and allocated personnel costs (e.g. Executive Director's time or any other staff who works minimally on the funded program). Applicant designation determines the amount of indirect costs permitted by OFCY (see below):

- Single Agencies & Collaborative Applicants: Up to a total of 15% of total grant request
- Small & Emerging: Up to a total of 20% of total grant request

Indirect Costs <span style="float:right">i</span>		
	Total Program Cost	OFCY Request
Indirect Costs	10000.00	0.00
Budget justification and calculations		
10% of award		

Projected Match: Grantees must provide a match report during the third progress report. **The OFCY match policy has been updated: each budget must have matching funds of at least 25% of the total program cost.** This section is auto calculated. by the formula:

Total Program Budget (-) OFCY Funds Requested (=) Projected Match

MATCHING FUNDS	
Matching Funds in Budget 	Matching Funds in Budget as % of OFCY Request
\$64,000.00	64.0%

Once this section is complete, use the **Submit** button to lock your agency’s submission.

Outcomes Setup



OFCY and the City of Oakland follow a Results-Based Accountability framework (RBA) to better understand the overall impacts of the program. During the first quarter, Agencies are asked to describe the outcomes associated with the funded program. Grantees are encouraged to use the Tip Sheet to ensure strong outcomes; the document is linked in the directions for the section. A minimum of two outcomes must be created, with a maximum of three. Use the **Add Outcome** button to add additional outcomes.

Once this section is complete, use the Submit button to lock your agency’s submission.

Sign & Submit

Once all sections are complete, a user with Agency Admin status such as the Executive Director/CEO or

**SIGN & SUBMIT**




SUBMIT

FY2025-2026



Sample Organization 1 - Test Youth Employment Program

Indicates required fields or invalid data.

I understand that by clicking 'Submit,' that I am submitting this workplan to OFCY for review. I verify that all information included in this workplan is accurate and in compliance with OFCY and City of Oakland contracting requirements.

[REVIEW FULL SCOPE OF WORK](#)


**OUTCOMES SETUP**



SUBMIT

Summer 2026

Summer Test 1

Indicates required fields or invalid data.

Using the [Strengthening Outcomes TipSheet](#), provide at least 2 outcomes that your program will report on within progress reports (maximum 3). Outcomes should be specific to your program's intended goals and be measurable and realistic. The description should contain numeric and narrative components according to the following guidelines and examples.

- Identify the item to be measured (e.g. participants, families, events).
- Specify the numeric goal in the numerator and, where applicable, the number of available units in the denominator.
- Describe the context.
  - Example 1:  
38 of 50 (75%) participants who took our program survey reported building positive relationships with their peers
  - Example 2:  
Of the 35 youth who participated in our program this year, 25 youth (71%) took on leadership positions within the program, their schools, or their communities. Examples of leadership accomplishments including serving as class officers at school, leading group activities, and mentoring peers.

OUTCOME (1)

Outcome Description

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Outcome Category

▼

ADD OUTCOME

Two outcomes must be created.

other contract signatory must submit the entire Scope of Work to be reviewed by the Grant Manager. Affirm the submission statement by checking the box and use the **Submit** button to submit the Scope of Work for review. The Full Scope of Work can be reviewed via the **PDF Icon** in the banner. Your Grant

Manager will review and work with you if updates are needed.