

OMB Approval No. 2577-0229
Expiration Date 11/30/2003

DETAIL ON TIMELINE ACTIVITIES (Continued)

Staffing of Center/Training Program and Classes Offered (Weekly Schedule for the Center)
(Please indicate how the computer learning center will be staffed, include hours per week.)

Staffing:

Project Coordinator:

Resident Paid Staff:

Other Paid Staff:

Resident or Other Volunteers:

Outside Agencies Providing Instructions:

Weekly Schedule for the Center (including days/hours open, classes, and open lab/free time on the computers.

Classes/Training Programs to be Offered:

Partnerships: Third Party/Voluntary Organization Funding and Participation

(Please list those partners involved in the initial set-up and what they brought to the center. Also indicate targeted partners or other partners that will be assisting in the daily operation of the center.)