## SCOPE OF WORK

**Peer Support Groups for Parents Curriculum Development/Training and TA Provider**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Activities and Subtasks</th>
<th>Staff Assignment</th>
<th>Timeline</th>
<th>Deliverables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include who, what, when, where, how and how much for each objective.</td>
<td>Indicate the activities and subtasks leading to the fulfillment of the objective. Include benchmarks or milestones in chronological order. Include the appropriate quantity or frequency of the associated activities or subtasks.</td>
<td>Indicate staff, consultants or subcontractors responsible for the respective activity or subtask.</td>
<td>Indicate start and end period.</td>
<td>Indicate Date Due.</td>
</tr>
</tbody>
</table>

**Contract Number:**  
**Agency Name:**  
**Project Name:**  
**Project Length:**

**Contract Period:**  
**Revision Date:**

**(Office Use Only)**  
**Report Period:**  
**Submission Date:**