

## Announcement of Funding Opportunity Statewide Systems Advocacy Network

<b>Legislative Authority</b>	The SSAN was established as a component of the New York Title VII State Plan for Independent Living (SPIL)
<b>Purpose of Grant</b>	The sole purpose of this RFP is for requesting proposals from eligible parties to establish and operate a Statewide Systems Advocacy Network Center.
<b>Project Period</b>	Anticipated 10/1/20-9/30/23
<b>Eligible Applicants</b>	<p>Eligible bidders include all New York State Plan for Independent Living (SPIL) network Centers for Independent Living (CILs) and New York State statutory Service Centers for Independent Living (SCILS) covered under section 1121-1124 of New York State Education Law.</p> <p>NYSED anticipates a total of up to fifteen (15) contracts will result from this RFP with a term of three years beginning on October 1, 2020 and ending at the expiration of the State Plan for Independent Living (SPIL), September 30, 2023.</p>
<b>Amount of Funding</b>	\$30,000 is expected to be available per year, per awardee, for a total of \$90,000 subject to the appropriation and availability of funds, for the three-year period of October 1, 2020 to September 30, 2023.
<b>Application Due Date and Mailing Address</b>	<p>Submit 1 original electronic copy (Word or pdf) of the application by 5pm on <b>09/02/2020</b> to <a href="mailto:ACCESILC@nysed.gov">ACCESILC@nysed.gov</a></p> <p><b>See below for electronic submission procedures</b></p>
<b>Questions and Answers</b>	All questions must be submitted via E-Mail to <a href="mailto:ACCESILC@nysed.gov">ACCESILC@nysed.gov</a> by August 7, 2020. A complete list of all Questions and Answers will be posted to <a href="http://www.acces.nysed.gov/pProcurement%20web%20page">htACCES tp://www.acces.nysed.gov/pProcurement web paget</a> no later than August 19, 2020.
<b>Pre-qualification Requirement</b>	Proposals received from nonprofit applicants that are not Prequalified in the Grants Gateway by 5:00 PM on the proposal due date of 09/02/2020 cannot be evaluated. Such proposals will be disqualified from further consideration. Please see the "Prequalification Requirement" section for additional information.

<p><b>Non-Mandatory Notice of Intent</b></p>	<p>The Notice of Intent (NOI) is not a requirement for submitting a complete application by the application date; however, NYSED strongly encourages all prospective applicants to submit an NOI to ensure a timely and thorough review and rating process. A non-profit applicant's NOI will also help to facilitate timely review of their prequalification materials. The notice of intent is a simple email notice stating your organization's (use the legal name) intent to submit an application for this grant. Please also include your organization's NYS Vendor ID. The due date is August 25, 2020. Please send the NOI to <a href="mailto:ACCESILC@nysed.gov">ACCESILC@nysed.gov</a>.</p>
<p><b>NYSED Designated Contacts</b></p>	<p>Program: <b>Joseph Tedesco</b>  Fiscal: <b>Lucas Rodriguez</b>  M/WBE: <b>Brian Hackett</b>  <a href="mailto:ACCESILC@nysed.gov">ACCESILC@nysed.gov</a></p>
<p><b>Electronic Submission Procedures</b></p>	<p><b>All bids must be received by 5:00 pm Eastern Time on September 2, 2020 to be considered.</b></p> <ol style="list-style-type: none"> <li>1. As indicated in the RFP, application documents should be submitted in Microsoft Office. PDF files that are editable and Optical Character Recognition (OCR) searchable are acceptable. Please do not submit application as a scanned PDF.</li> <li>2. Submission documents requiring a signature must be signed using one of the methods listed below, and may be submitted in as a Microsoft Office, PDF, or JPG document. A scanned PDF is acceptable for these documents.</li> <li>3. The following forms of e-signatures are acceptable: <ol style="list-style-type: none"> <li>a. handwritten signatures on faxed or scanned documents</li> <li>b. e-signatures that have been authenticated by a third-party digital software, such as DocuSign and Adobe Sign</li> <li>c. stored copies of the images of signatures that are placed on a document by copying and pasting or otherwise inserting them into the documents</li> </ol> </li> <li>4. Unacceptable forms of e-signatures include: <ol style="list-style-type: none"> <li>a. a typed name, including a signature created by selecting a script or calligraphy font for the typed name of the person "signing"</li> </ol> </li> <li>5. To identify the signer and indicate that the signer understood and intended to agree to the terms of the signed document, the signer will sign beside or provide by email the following attestation: "I agree, and it is my intent, to sign this document by [describe the signature solution used] and by electronically submitting this document to [name of recipient individual or entity]. I understand that my signing and submitting this document is the legal equivalent of having placed my handwritten signature on the submitted document and this attestation. I understand and agree that by electronically signing and submitting this document I am affirming to the truth of the information contained therein."</li> <li>6. In order to ensure the timely receipt of your application, please use the subject line "APPLICATION SUBMISSION RFP" - failure to</li> </ol>

	<p>appropriately label your bid or submitting a bid to any email address other than the one identified above may result in the bid not being received by the deadline and considered for award.</p> <p><b>7. Applications received after 5:00 pm Eastern Time on September 2, 2020 will be disqualified.</b></p>
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The State Education Department does not discriminate on the basis of race, creed, color, national origin, religion, age, sex, military, marital status, familial status, domestic violence victim status, carrier status, disability, genetic predisposition, sexual orientation and criminal record in its recruitment, educational programs, services, and activities. NYSED has adopted a web accessibility policy, and publications designed for distribution can be made available in an accessible format upon request. Inquiries regarding this policy of nondiscrimination should be directed to the Office of Human Resources Management, Room 528 EB, Education Building, Albany, New York 12234.

## Statewide Systems Advocacy Network Centers (SSAN) 10/1/20-9/30/23

### Application Guidance

#### Background

Beginning in October 2001, the Office of Adult Career and Continuing Education Services (ACCES) formerly VESID, established the Statewide Systems Advocacy Network (SSAN) to coordinate activities in support of the New York State Independent Living Council Inc.'s (NYSILC) disability policy agenda. The SSAN was established as a component of the New York Title VII State Plan for Independent Living (SPIL) that guides the use of Federal Title VII Part B and Title VII part C independent living resources in New York State. The efforts of the SSAN over the past 19 years are viewed by ACCES and NYSILC as highly successful in carrying out activities toward the achievement of disability policy agenda goals.

This new SSAN request for proposals seeks to continue work begun and strengthen capacity over the next three years by making funding available for the establishment of Statewide Systems Advocacy Network Centers (SSANC). The proposal seeks to establish up to fifteen (15) SSAN Center project sites for this model component.

#### Purpose

The purpose of these projects is to conduct coordinated statewide advocacy activities in support of the New York State Independent Living Council's (NYSILC) disability policy agenda based on statewide needs assessment results.

#### Description of Model

The up to fifteen (15) Statewide Systems Advocacy Network Centers (SSANC) will act as a statewide network that is organized and guided by a Statewide Systems Advocacy Network Coordinator (SSAN) Coordinator, to identify and execute strategies to carry out advocacy efforts resulting in achievement of a minimum of two significant statewide systemic changes each year related to NYSILC's public policy agenda goals. Each center will be required to hire a designated part-time systems advocate (staff person) (.50 FTE) that works a minimum of 20 hours per week addressing NYSILC's public policy agenda. A SSAN Center may use other funds to expand the time commitment of the systems advocates. This includes the ability to subsidize the position with other funding and work duties to retain competent staff with an emphasis on achievement of 90 percent of performance targets each year to continue to receive funding. If performance targets are not achieved in any year the center will be required to develop a corrective action plan and partake in technical assistance from the SSAN Coordination entity and if adequate improvement is not demonstrated by the end of the year in which program improvement is required then ACCES-VR will determine if funding will be terminated at the end of the contract year.

## **Deliverables**

The contractors will be expected to:

- Identify and maintain a part-time systems advocate (staff person) with .50 FTE (minimum of 20 hours per week) and email address to serve as a single point of contact.
- Provide the SSAN Coordinator monthly reports of numbers and types of SSAN activities in a format provided by the SSAN Coordination entity using the prescribed SSAN Web database reporting format for the activities.
- Establish no fewer than five (5) local partnerships or coalitions per contract year with organizations whose mission is consistent with Independent Living philosophy and which addresses issues of concern to people with disabilities such as health, aging, poverty, housing, education, employment and transportation. Such partnerships may be evidenced by the regular exchange of information and/or shared decision-making between CILs and local organizations and coalitions, by the attendance of CIL staff at partnership organization meetings and partnership organization staff at meetings and trainings at CILs, by CIL staff who sit on local planning councils, advisory committees and boards of local organizations with missions consistent with the Independent Living philosophy, and by partner organization staff who are represented on CIL boards and committees.
- Respond to no fewer than forty-four (44) educational alerts per contract year disseminated by the SSAN Coordinator on behalf of the network and distribute them to local volunteer networks, keeping track of what alerts have been responded to and the level of response activity. This includes any significant communication that might be received in the process and forwarding it to the SSAN Coordinator related to the issue.
- Coordinate or participate in a minimum of twenty (20) public education activities per contract year at the local level about Independent Living and issues of concern to people with disabilities. Such activities include facilitating educational and training events at the CIL, presenting information at other organizations' events and generating media hits in local newspapers, television, radio, newsletters and other local media outlets.
- Engage in at least six (6) local community organizing activities or events per contract year with the goal of engaging community members and volunteers in providing education about statewide issues impacting people with disabilities, including issues addressed in the statewide disability policy agenda shaped by priorities identified in the NYSILC needs assessment.

- Provide a minimum of six (6) oral or written public testimonies, statements or letters each contract year in response to a documented request from the state legislature, state agencies, statewide councils or other statewide public bodies.

### **Funding Amounts**

It is expected that ACCES/NYSED will have funding available in the amount of thirty thousand dollars (\$30,000) per year, per awardee, for a total of ninety thousand dollars (\$90,000) for the three (3) year contract period, beginning October 1, 2020 through September 30, 2023, per contract. Proposals should not exceed thirty thousand dollars (\$30,000) per year for a total of ninety thousand dollars (\$90,000) for the three (3) year contract period.

If new or additional funding becomes available, and NYSED chooses to distribute this funding to applicants of this current RFP, NYSED will allocate the funds in this order by:

1. Approving awards, in rank order, for eligible applicants who received passing scores, but who did not rank high enough to receive the initial funding; and
2. Allocating additional funds among already awarded programs. Maximum request amounts will be established by distributing funding proportionally (based on total annual budget) to those currently funded projects.

Such plan will be subject to review and approval by the Office of the State Comptroller.

A decrease in funding for any subsequent funding year will result in a proportional reduction to all funded projects based on total annual budget.

### **Reporting Requirements**

Submit data and monthly reports to the SSAN Coordinator using prescribed database in digital format by the 15<sup>th</sup> of each following month.

### **Payment & Reporting**

The contractor will be required to submit quarterly reimbursement reports with regular expenditure report to NYSED. Quarterly payments will be made to the vendor once the quarterly reimbursement reports are reviewed and project initiatives and outcomes are determined to be adequate.

Final payment is contingent upon meeting the annual performance requirements outlined in the section titled "Deliverables."

Failure to submit the required reports may result in the suspension of future payments.

Any items in the proposed budget deemed to be non-allowable or inappropriate will be eliminated.

## **Budget**

Applicants must submit a budget with this application for the initial 12-month project period. The 12-month budget will be reviewed and scored.

The applicant must complete the Budget Form. Budgeted costs must comply with applicable State and federal laws and regulations and the Department's Fiscal Guidelines. The budget must bear the original signature of the Chief School/Administrative Officer.

The budget should be reasonable and appropriate to cover program expenses.

## **Requirements for Funding**

**Registration In Federal System for Award Management (SAM)** – In order to be awarded federal funds, an agency must be registered and maintain registration in the federal [System for Award Management](#) known as SAM. SAM is a government-wide, web-enabled database that collects, validates, stores and disseminates business information about organizations receiving federal funds. Information on an agency's registration in SAM needs to be provided on the Payee Information Form that must be submitted with the application.

**Payee Information Form/NYSED Substitute W-9** – The [Payee Information Form](#) is a packet containing the Payee Information Form itself and an accompanying NYSED Substitute W-9. The NYSED Substitute W-9 may or may not be needed from your agency. Please follow the specific instructions provided with the form. The Payee Information Form is used to establish the identity of the applicant organization and enables it to receive federal (and/or State) funds through NYSED.

## **Prequalification Requirement**

Pursuant to the New York State Division of the Budget bulletin H-1032, not-for profit organizations must Prequalify to do business with New York State agencies before they can compete for State grants. The process allows nonprofits to address questions and concerns prior to entering a competitive bid process. Nonprofits are strongly encouraged to begin the Prequalification process as soon as possible.

To become prequalified, a nonprofit must register with Grants Gateway and complete an online Prequalification application. This includes completing a series of forms by answering basic questions regarding the organization and uploading key organizational documents.

Detailed information on how to register with the Grants Gateway and become prequalified is available on the [Grants Management](#) website. ~~(<https://grantsmanagement.ny.gov/>)~~

**Disclaimer:** *New York State reserves 5-10 business days from the receipt of complete Prequalification applications to conduct its review. If supplementary information or updates are required, review times will be longer. Due to the length of time this process could take to complete, it is advised that nonprofits Prequalify as soon as possible. Failure to successfully complete the Prequalification process early enough may result in a grant application being disqualified.*

**Proposals received from nonprofit applicants that are not Prequalified in the Grants Gateway by 5:00 PM on the proposal due date of 09/02/2020 cannot be evaluated. Such proposals will be disqualified from further consideration.**

### **Entities' Responsibility**

Projects must operate under the jurisdiction of the local board of education, or other appropriate governing body, and are subject to at least the same degree of accountability as all other expenditures of the local agency. The local board of education, or other appropriate governing body, is responsible for the proper disbursement of, and accounting for, project funds. Written agency policy concerning wages, mileage and travel allowances, overtime compensation, or fringe benefits, as well as State rules pertaining to competitive bidding, safety regulations and inventory control must be followed. Supporting or source documents are required for all grant-related transactions entered into the local agency's recordkeeping systems. Source documents that authorize the disbursement of grant funds consist of purchase orders, contracts, time and effort records, delivery receipts, vendor invoices, travel documentation and payment documents.

Supporting documentation for grants and grant contracts must be kept for at least six years after the last payment was made unless otherwise specified by program requirements. Additionally, audit or litigation will "freeze the clock" for records retention purposes until the issue is resolved. All records and documentation must be available for inspection by State Education Department officials or their representatives.

For additional information about grants, please refer to the [Fiscal Guidelines for Federal and State Aided Grants](#).

### **Accessibility of Web-Based Information and Applications**

Any documents, web-based information and applications development, or programming delivered pursuant to the contract or procurement, will comply with New York State Education Department IT Policy NYSED-WEBACC-001, Web Accessibility Policy as such policy may be amended, modified or superseded, which requires that state agency web-based information, including documents, and applications are accessible to persons with disabilities. Documents, web-based information and applications must conform to NYSED-WEBACC-001 as determined by quality assurance testing. Such quality

assurance testing will be conducted by NYSED employee or contractor and the results of such testing must be satisfactory to NYSED before web-based information and applications will be considered a qualified deliverable under the contract or procurement.

### **Contract Terms and Conditions**

Grant awards to non-profit and for-profit organizations will require that the awardee enter into a grant contract, the form of which is contained in an attachment to this RFP. In addition to being signed by the awardee and NYSED Counsel, the contract will need to be submitted for review and approval by the NYS Attorney General and the Office of the State Comptroller. All provisions of this RFP are subordinate to the terms and conditions of the grant contract. The contents of this RFP, any subsequent correspondence related to final contract negotiations, and such other stipulations as agreed upon may be made a part of the final contract developed by NYSED.

### **Minority and Women-Owned Business Enterprise (M/WBE) Participation Goals Pursuant to Article 15-A of the New York State Executive Law**

***The following M/WBE requirements apply when an applicant submits an application for grant funding that exceeds \$25,000 for the full grant period.***

***All forms referenced here can be found in the M/WBE Documents section at the end of this RFP.***

All applicants are required to comply with NYSED's Minority and Women-Owned Business Enterprises (M/WBE) policy. Compliance can be achieved by one of the three methods described below. Full participation by meeting or exceeding the M/WBE participation goal for this grant is the preferred method.

M/WBE participation includes services, materials, or supplies purchased from minority- and women-owned firms certified with the NYS Division of Minority and Women Business Development. Not-for-profit agencies are not eligible for this certification. For additional information and a listing of currently certified M/WBEs, see the [NYS MWBE Directory](#).

The M/WBE participation goal for this grant is 30% of each applicant's total discretionary non-personal service budget each year of the grant. Discretionary non-personal service budget is defined as total annual budget, excluding the sum of funds budgeted for:

1. direct personal services (i.e., professional and support staff salaries) and fringe benefits; and
2. rent, lease, utilities and indirect costs, if these items are allowable expenditures.

The M/WBE Goal Calculation Worksheet is provided for use in calculating the dollar amount of the M/WBE goal for this grant application.

All requested information and documentation should be provided at the time of submission. If this cannot be done, the applicant will have to submit the necessary documents and respond satisfactorily to any follow-up questions from the Department. Failure to do so may result in loss of funding.

## **METHODS TO COMPLY**

An applicant can comply with NYSED's M/WBE policy by one of three methods:

**1. Full Participation** - This is the preferred method of compliance. Full participation is achieved when an applicant meets or exceeds the participation goals for this grant.

### **COMPLETE FORMS:**

- M/WBE Goal Calculation Worksheet
- M/WBE Cover Letter
- M/WBE 100 Utilization Plan
- M/WBE 102 Notice of Intent to Participate

**2. Partial Participation, Partial Request for Waiver** - This is acceptable only if good faith efforts to achieve full participation are made and documented, but full participation is not possible.

### **COMPLETE FORMS:**

- M/WBE Goal Calculation Worksheet
- M/WBE Cover Letter
- M/WBE 100 Utilization Plan
- M/WBE 101 Request for Waiver
- M/WBE 102 Notice of Intent to Participate
- M/WBE 105 Contractor's Good Faith Efforts

**3. No Participation, Request for Complete Waiver** - This is acceptable only if good faith efforts to achieve full or partial participation are made and documented, but do not result in any participation by M/WBE firm(s).

### **COMPLETE FORMS:**

- M/WBE Goal Calculation Worksheet
- M/WBE Cover Letter
- M/WBE 101 Request for Waiver
- M/WBE 105 Contractor's Good Faith Efforts

## **GOOD FAITH EFFORTS**

Applicants must make a good faith effort to solicit NYS certified M/WBE firms as subcontractors and/or suppliers to achieve the goals for this grant. Solicitations

may include, but are not limited to: advertisements in minority and women-centered publications; solicitation of vendors found in the [NYS Directory of Certified Minority and Women-Owned Business Enterprises](#); and the solicitation of minority and women-oriented trade and labor organizations.

Good faith efforts include actions such as setting up meetings or announcements to make M/WBEs aware of supplier and subcontracting opportunities, identifying logical areas of the grant project that could be subcontracted to M/WBE firms, and utilizing all current lists of M/WBEs who are available for and may be interested in subcontracting or supplying goods for the project.

Applicants should document their efforts to comply with the stated M/WBE goals and submit this with their applications as evidence. Examples of acceptable documentation can be found in form M/WBE 105, Contractor's Good Faith Efforts. NYSED reserves the right to reject any application for failure to document "good faith efforts."

## **REQUEST FOR WAIVER**

When full participation cannot be achieved, applicants must submit a Request for Waiver (M/WBE 101). Requests for Waivers must be accompanied by documentation explaining the good faith efforts made and reasons they were unsuccessful in obtaining M/WBE participation.

NYSED reserves the right to approve the addition or deletion of subcontractors or suppliers to enable applicants to comply with the M/WBE goals, provided such addition or deletion does not impact the technical proposal and/or increase the total budget.

All payments to Minority and Women-Owned Business Enterprise subcontractor(s) should be reported to the NYSED M/WBE Program Unit using the M/WBE 104G Quarterly M/WBE Compliance Report. This report should be submitted on a quarterly basis and can be requested at [MWBEgrants@nysed.gov](mailto:MWBEgrants@nysed.gov).

NYSED's M/WBE Coordinator is available to assist applicants in meeting the M/WBE goals. The Coordinator can be reached at [MWBEgrants@nysed.gov](mailto:MWBEgrants@nysed.gov).

## **Equal Employment Opportunity Reporting (EEO) Pursuant to Article 15-A of the New York State Executive Law**

Applicants must complete and submit form EEO 100: Staffing Plan.

## **NYSED's Reservation of Rights**

NYSED reserves the right to: (1) reject any or all proposals received in response to the RFP; (2) withdraw the RFP at any time, at the agency's sole discretion; (3) make an award

under the RFP in whole or in part; (4) disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP; (5) seek clarifications of proposals; (6) use proposal information obtained through site visits, management interviews and the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP; (7) prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available; (8) prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments; (9) change any of the scheduled dates; (10) waive any requirements that are not material; (11) negotiate with the successful bidder within the scope of the RFP in the best interests of the state; (12) conduct contract negotiations with the next responsible bidder, should the agency be unsuccessful in negotiating with the selected bidder; (13) utilize any and all ideas submitted in the proposals received; (14) unless otherwise specified in the solicitation, every offer is firm and not revocable for a period of 90 days from the bid opening; (15) require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's proposal and/or to determine an offerer's compliance with the requirements of the solicitation; (16) request best and final offers.

### **Debriefing Procedures**

All unsuccessful applicants may request a debriefing within fifteen (15) calendar days of receiving notice from NYSED. Bidders may request a debriefing letter on the selection process regarding this RFP by submitting a written request to the Fiscal Contact person at:

NYS Education Department  
Contract Administration Unit  
89 Washington Avenue  
Room 501W EB  
Albany, NY 12234

The Fiscal Contact person will arrange with program staff to provide a written summary of the proposal's strengths and weaknesses, as well as recommendations for improvement. Within ten (10) business days, the program staff will issue a written debriefing letter to the bidder.

### **Contract Award Protest Procedures**

Applicants who receive a notice of non-award or disqualification may protest the NYSED award decision subject to the following:

1. The protest must be in writing and must contain specific factual and/or legal allegations setting forth the basis on which the protesting party challenges the contract award by NYSED.

2. The protest must be filed within ten (10) business days of receipt of a debriefing or disqualification letter. The protest letter must be filed with:

NYS Education Department  
Contract Administration Unit  
89 Washington Avenue  
Room 501W EB  
Albany, NY 12234

3. The NYSED Contract Administration Unit (CAU) will convene a review team that will include at least one staff member from each of NYSED's Office of Counsel, CAU, and the Program Office. The review team will review and consider the merits of the protest and will decide whether the protest is approved or denied. Counsel's Office will provide the bidder with written notification of the review team's decision within seven (7) business days of the receipt of the protest. The original protest and decision will be filed with OSC when the contract procurement record is submitted for approval and CAU will advise OSC that a protest was filed.

4. The NYSED Contract Administration Unit (CAU) may summarily deny a protest that fails to contain specific factual or legal allegations, or where the protest only raises issues of law that have already been decided by the courts.

### **Vendor Responsibility**

State law requires that the award of state contracts be made to responsible vendors. Before an award is made to a not-for-profit entity, a for-profit entity, a private college or university or a public entity not exempted by the Office of the State Comptroller, NYSED must make an affirmative responsibility determination. The factors to be considered include legal authority to do business in New York State; integrity; capacity - both organizational and financial; and previous performance. Before an award of \$100,000 or greater can be made to a covered entity, the entity will be required to complete and submit a Vendor Responsibility Questionnaire. School districts, Charter Schools, BOCES, public colleges and universities, public libraries, and the Research Foundation for SUNY and CUNY are some of the exempt entities. For a complete list, see [OSC's website](#).

NYSED recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the [VendRep System Instructions](#) or go directly to the [VendRep System online](#).

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the

[Office of the State Comptroller's Help Desk](#) at 866-370-4672 or 518-408-4672 or by email at [ITServiceDesk@osc.ny.gov](mailto:ITServiceDesk@osc.ny.gov).

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the [VendRep website](#) or may contact NYSED or the Office of the State Comptroller's Help Desk for a copy of the paper form.

### **Subcontractors:**

For vendors using subcontractors, a Vendor Responsibility Questionnaire and a NYSED vendor responsibility review are required for a subcontractor when:

- the subcontractor is known at the time of the contract award;
- the subcontractor is not an entity that is exempt from reporting by OSC; and
- the subcontract will equal or exceed \$100,000 over the life of the contract

### **Workers' Compensation Coverage and Debarment**

New York State Workers' Compensation Law (WCL) has specific coverage requirements for businesses contracting with New York State and additional requirements that provide for the debarment of vendors that violate certain sections of WCL. The WCL requires, and has required since introduction of the law in 1922, the heads of all municipal and State entities to ensure that businesses have appropriate workers' compensation and disability benefits insurance coverage *prior* to issuing any permits or licenses, or *prior* to entering into contracts.

Workers' compensation requirements are covered by WCL Section 57, while disability benefits are covered by WCL Section 220(8). The Workers' Compensation Benefits clause in Appendix A – STANDARD CLAUSES FOR NEW YORK STATE CONTRACTS states that in accordance with Section 142 of the State Finance Law, a contract shall be void and of no force and effect unless the contractor provides and maintains coverage during the life of the contract for the benefit of such employees as are required to be covered by the provisions of the WCL.

Under provisions of the 2007 Workers' Compensation Reform Legislation (WCL Section 141-b), any person, or entity substantially owned by that person: subject to a final assessment of civil fines or penalties, subject to a stop-work order, or convicted of a misdemeanor for violation of Workers' Compensation laws Section 52 or 131, is barred from bidding on, or being awarded, any public work contract or subcontract with the State, any municipal corporation or public body for one year for each violation. The ban is five years for each felony conviction.

### **PROOF OF COVERAGE REQUIREMENTS**

The Workers' Compensation Board has developed several forms to assist State contracting entities in ensuring that businesses have the appropriate workers'

compensation and disability insurance coverage as required by Sections 57 and 220(8) of the WCL.

***Please note – an ACORD form is not acceptable proof of New York State workers' compensation or disability benefits insurance coverage.***

### **Proof of Workers' Compensation Coverage**

To comply with coverage provisions of the WCL, the Workers' Compensation Board requires that a business seeking to enter into a State contract submit appropriate proof of coverage to the State contracting entity issuing the contract. For each new contract or contract renewal, the contracting entity must obtain ONE of the following forms from the contractor and submit to OSC to prove the contractor has appropriate workers' compensation insurance coverage:

- **Form C-105.2** – Certificate of Workers' Compensation Insurance issued by private insurance carriers, or **Form U-26.3** issued by the State Insurance Fund; or
- **Form SI-12** – Certificate of Workers' Compensation Self-Insurance; or **Form GSI-105.2** Certificate of Participation in Workers' Compensation Group Self-Insurance; or
- **CE-200** – Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage.

### **Proof of Disability Benefits Coverage**

To comply with coverage provisions of the WCL regarding disability benefits, the Workers' Compensation Board requires that a business seeking to enter into a State contract must submit appropriate proof of coverage to the State contracting entity issuing the contract. For each new contract or contract renewal, the contracting entity must obtain ONE of the following forms from the contractor and submit to OSC to prove the contractor has appropriate disability benefits insurance coverage:

- **Form DB-120.1** – Certificate of Disability Benefits Insurance; or
- **Form DB-155** – Certificate of Disability Benefits Self-Insurance; or
- **CE-200** – Certificate of Attestation of Exemption from New York State Workers' Compensation and/or Disability Benefits Coverage.

For additional information regarding workers' compensation and disability benefits requirements, please refer to the [New York State Workers' Compensation Board website](#). Alternatively, questions relating to either workers' compensation or disability benefits coverage should be directed to the NYS Workers' Compensation Board, Bureau of Compliance at (518) 486-6307.

### **Submission Instructions and Method of Award**

## **Page Limits and Formatting Specifications**

The Proposal Narrative and Budget Narrative are to be submitted on single-spaced 8.5" x 11" pages with one-inch margins. Charts/tables are not required to adhere to this standard. Use a Times Roman or Arial font in a 12-point size. If the Proposal Narrative and Budget Narratives exceed the page limit, the excess pages will not be read by the reviewers. Do not include any attachments or addenda.

Proposal Narrative – no more than 10 pages  
Budget Narrative -- no more than 3 pages

Application documents should be submitted in Microsoft Office. PDF files that are editable and Optical Character Recognition (OCR) searchable are acceptable. Please do not submit application as a scanned PDF.

### **Criteria for Evaluating Bids**

All complete applications received by the deadline will be reviewed using the following criteria and ratings. Applicants must ensure that all components of this application request have been addressed, the required number of copies has been provided, all forms and assurances have been completed, and the original signatures are included as required.

An evaluation committee of NYSED staff will complete a review of all applications submitted. The committee will review each application to determine compliance with the requirements described in the RFP. NYSED retains the right to determine whether any deviation from the requirements of this RFP is substantial in nature and may reject in whole or in part any and all applications, waive minor irregularities and conduct discussions with all responsible bidders.

Proposals receiving at least sixty percent (60%) of the points available (a total average of 60 out of 100 points) will move on to be ranked for award purposes. Applications with a score of less than an average of 60 points in the Technical Proposal section will be eliminated from further consideration.

### **Technical Criteria**

**(80 Points)**

#### **Narrative of Systems Advocacy Experience (30 Points)**

In no more than two (2) single spaced pages, covering the preceding two years, the applicant will describe the scope and results of involvement in:

- 1.) Designing strategies for recruiting volunteers to assist with carrying out systems advocacy.

(6 points)

- 2.) Innovative techniques and strategies used to communicate with constituents, the media and the public at large about statewide disability agenda issues. (6 points)
- 3.) Collaboration with other local/regional consumer controlled organizations in support of statewide systems advocacy initiatives. (6 points)
- 4.) Training programs conducted for volunteers, constituents, new leaders, policy makers, legislators and others that promotes statewide systems advocacy. (6 points)
- 5.) Any specific instances when oral and/or written testimony was provided on behalf of the organization by either a staff member or volunteer on issues appearing in prior years' statewide independent living disability agenda. (6 points)

### **Plan of Operation (40 Points)**

In no more than six (6) single spaced pages the applicant will provide a rationale for and describe strategies it will use to successfully meet the deliverables in the following areas:

- 1) Provide a plan to establish at least five local partnerships and coalitions per year (8 points)
- 2) Provide a plan to disseminate no fewer than 44 educational alerts from the SSAN Coordinator on behalf of the SSAN network each year (8 points)
- 3) Provide a plan that demonstrates coordination or participation in no fewer than 20 public education activities at the local level each year (8 points)
- 4) Provide a plan to engage in no fewer than six local community organizing activities or events each year (8 points)
- 5) Provide a plan to deliver at least six public testimonies, statements or letters each year (8 points)

### **Qualifications of Key Staff and Personnel (5 Points)**

In no more than two (2) single spaced pages, the applicant will:

- 1) Describe experience and training of key staff in areas of leadership development (2 points)
- 2) Describe experience and training of key staff in coordinating advocacy initiatives (1 point)

- 3) Provide a mission and vision statement for carrying out local/regional efforts to promote statewide systems advocacy and describe any affiliations, memberships, or other involvement of key staff in advocacy related organizations or groups that complement the Statewide Systems Advocacy Network (2 points)

### **Letters of Support (5 Points)**

Two letters of support from consumer run advocacy groups in the applicant's regional area should describe evidence of appropriate experience with and expertise in collaboration, partnership development and advocacy coordination.

### **Financial Criteria (20 Points)**

**The Financial Criteria portion of the RFP will be scored based upon an evaluation of the budget and budget narrative.**

The Budget Form, including a detailed budget for year one and the Three (3) year Budget Summary, will be reviewed for accuracy and completeness. The budget and budget narrative will be reviewed to determine that the proposed use of the funds is for the direct support of the program, and that the anticipated expenditures are both allowable and appropriate and reasonable. The narrative, no more than three (3) pages, will also be reviewed to determine the extent to which it specifically explains and relates proposed expenditures to specific activities to meet project goals.

### **Method of Award**

Each eligible proposal will be reviewed by at least two reviewers. Each reviewer will score the proposal according to the indicated point criteria in the Proposal Narrative and the Budget using the Proposal Evaluation Rubric. If individual scores are more than 15 points apart, another reviewer will score the application. The two scores closest in numeric value will be averaged to calculate the final average score of the application. If the third reviewer's score is equal to the average of the two original scores, the third reviewer's score will become the final score.

Proposals will be ranked in order of final average score from highest to lowest. In the event of tie scores, proposals with the highest score on the Operational Plan will be ranked higher. The higher-Narrative of Systems Advocacy Experience will be used as a third tie-breaker, if necessary.

Proposals that receive a final average score of 60 or more will be considered for funding. Applicants will be funded in rank order until the funds are exhausted.

## Statewide Systems Advocacy Network Centers Rating Form

Bidder Name: \_\_\_\_\_

Total Score: \_\_\_\_\_

Name of Reviewer: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_

**Directions for Reviewers:** Reviewers are asked to rate each section of the RFP using the criteria noted and a rating system from zero to the highest score possible for each subsection, without using decimals. Reviewers are also required to provide comments to support the rating given. Proposals need to receive at least sixty percent (60%) of the available points (a total of 60 out of 100 points) to be eligible for an award. Completed original score sheets will be collected by ACCES-VR's Independent Living Services Unit by the closing date of the review period. Reviewers will keep all rating information confidential.

### **Rater Certification**

Unless specifically authorized by the New York State Education Department, I will not discuss a proposal or my written comments or scores with anyone else before, during, or after my review; I will not divulge the names of any bidders or the number of proposals I review; and I will not share with anyone else copies of proposals, completed rubrics or any other documents related to the review. I will not, under any circumstances, contact an applicant to obtain further information or otherwise discuss the application, without prior approval from the New York State Education Department's Contract Administration Unit. I certify that this evaluation was conducted independently and the resulting score was in no way influenced by any outside party.

### Rating Guidelines:

Extensive - Specific and comprehensive. Complete, detailed, and clearly articulated information as to how the criteria are met. Well-conceived and thoroughly developed ideas.

Stronger than Average - General but sufficient detail. Adequate information as to how the criteria are met, but some areas are not fully explained and/or questions remain. Some minor inconsistencies and weaknesses.

Adequate - Non-specific. Criteria appear to be minimally met, but limited information is provided about approach and strategies. Lacks focus and detail.

Less than Adequate - Does not meet the criteria, fails to provide information, provides inaccurate information, or provides information that requires substantial clarification as to how the criteria are met.

No Strategy/nonexistent - Does not address the criteria or simply re-states the criteria.

**Technical Component: Total Possible Points: 80 Points**

**Section I. - Narrative of Systems Advocacy Experience**

(Total 30 of 80 points) as follows:

1. The applicant describes strategies to recruit volunteers to assist with carrying out systems advocacy **(up to six points)**.

Strategies are:

- A. Extensive **(6 points)**
- B. Stronger than average **(4-5 points)**
- C. Adequate **(3 points)**
- D. Less than Adequate **(1-2 points)**
- E. No strategy **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

2. The applicant describes innovative techniques and strategies it used to communicate with constituents, the media and the public at large about statewide disability agenda issues **(up to six points)**;

Techniques and strategies are:

- A. Extensive **(6 points)**
- B. Stronger than average **(4-5 points)**
- C. Adequate **(3 points)**
- D. Less than Adequate **(1-2 points)**
- E. No strategy **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

3. The applicant describes collaboration with other local/regional consumer controlled organizations in support of statewide systems advocacy initiatives **(up to six points)**;

Collaboration is:

- A. Extensive **(6 points)**
- B. Stronger than average **(4-5 points)**
- C. Adequate **(3 points)**
- D. Less than Adequate **(1-2 points)**
- E. No strategy **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

4. The applicant describes training programs it has conducted for volunteers, constituents, new leaders, policy makers, legislators, and others that promotes statewide systems advocacy **(up to six points)**;

Training programs are:

- A. Extensive **(6 points)**
- B. Stronger than average **(4-5 points)**
- C. Adequate **(3 points)**
- D. Less than Adequate **(1-2 points)**
- E. No strategy **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

5. The applicant describes specific instances where oral and/or written testimony was provided on behalf of the organization by a staff member or volunteer on issues appearing in prior years' statewide independent living disability agenda (**up to six points**);

Description of testimony is:

- A. Extensive **(6 points)**
- B. Stronger than average **(4-5 points)**
- C. Adequate **(3 points)**
- D. Less than Adequate **(1-2 points)**
- E. No strategy **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

Total points for Section I. \_\_\_\_\_

**Section II. - Plan of Operation**

(Total 40 of 80 points) as follows:

1. The applicant describes a plan to establish at least five local partnerships and coalitions per year **(up to eight points)**;

The plan is:

- A. extensive **(8 points)**
- B. adequate **(5-7 points)**
- C. Less than adequate **(1-4 points)**
- D. nonexistent **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

2. The applicant describes a plan to disseminate no fewer than 44 educational alerts from the Statewide Systems Advocacy Network (SSAN) Coordinator on behalf of the SSAN each year **(up to eight points)**;

The plan is:

- A. extensive **(8 points)**
- B. adequate **(5-7 points)**
- C. Less than adequate **(1-4 points)**
- D. nonexistent **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_  
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\_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

3. The applicant describes a plan that demonstrates coordination or participation in no fewer than 20 public education activities at the local level each year **(up to eight points)**;

The plan is:

- A. extensive **(8 points)**
- B. adequate **(5-7 points)**
- C. less than adequate **(1-4 points)**
- D. nonexistent **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

4. The applicant describes a plan to engage in no fewer than six local community organizing activities or events each year **(up to eight points)**;

The plan is:

- A. extensive **(8 points)**
- B. adequate **(5-7 points)**
- C. less than adequate **(1-4 points)**
- D. nonexistent **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

5. The applicant describes a plan to deliver at least six public testimonies, statements, or letters each year **(up to eight points)**;

The plan is:

- A. extensive **(8 points)**
- B. adequate **(5-7 points)**
- C. less than adequate **(1-4 points)**
- D. nonexistent **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

Total points for Section II \_\_\_\_\_

**Section III. - Qualifications of Key Staff and Personnel**

(Total 5 of 80 points) as follows:

1. The applicant describes experience and training of key staff in the area of leadership development **(up to two points)**;

- A. Key staff has extensive leadership development training **(2 points)**
- B. Key staff has adequate leadership development training **(1 point)**
- C. Key staff is limited/ineffective training in leadership development **(0 points)**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

- 2. The applicant describes experience and training of key staff in the area of coordinating advocacy initiatives **(up to one point)**;
  - A. Key staff has adequate training and experience in coordinating advocacy initiatives. **(1 point)**
  - B. Key staff has no training and experience in coordinating advocacy initiatives. **0 points**

Score: \_\_\_\_\_

Comments: \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

- 3. The applicant provides a mission and vision statement for carrying out local/regional efforts to promote statewide systems advocacy **(up to one point)**

- A. The applicant provided mission and vision statements that focuses on local/regional systems advocacy  
**(1 point)**
- B. The applicant did not provide mission and vision statements adequately focusing on local/regional systems advocacy  
**(0 points)**

**Score:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

- 4. The applicant describes any affiliations, memberships, or other involvement of key staff in advocacy related organizations or groups that complement the Statewide Systems Advocacy Network **(up to one point)**

- A. The applicant adequately described any affiliations, memberships, or other involvement of key staff in advocacy related organizations or groups that complement the Statewide Systems Advocacy Network  
**(1 point)**

- B. The applicant did not adequately describe any affiliations, memberships, or other involvement of key staff in advocacy related organizations or groups that complement the Statewide Systems Advocacy Network  
**(0 points)**

**Score:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

Total points for Section III \_\_\_\_\_

**Section IV. - Letters of Support**

(Total 5 of 80 points) as follows:

- 1.) Two (2) Letters of Support from consumer advocacy groups in the applicant's regional area are included and describe evidence of appropriate experience with and expertise in collaboration, partnership development, and advocacy coordination **(up to five points)**
  - A. Two letters from required categories are provided **(5 points)**
  - B. One letter from a required category is provided **(3 points)**
  - C. No letters are provided **(0 points)**

**Score:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

Total points for Section IV \_\_\_\_\_

**Section V:**

**Budget/Budget Narrative. This section accounts for 20 points.**

1. The budget and budget narrative shows that the proposed use of funds is for the direct support of the program, and that the anticipated expenditures are allowable, appropriate, and reasonable.

(Up to ten (10) points)

- A. Budget and budget narrative evidencing these criteria is extensive (10 points)
- B. Budget and budget narrative evidencing these criteria is stronger than average (8-9 points)
- C. Budget and budget narrative evidencing these criteria is adequate (6-7 points)
- D. Budget and budget narrative evidencing these criteria is limited (1-5 point)
- E. Budget and budget narrative on evidencing these criteria is nonexistent (0 points)

**Score:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

- 2. The narrative specifically explains and relates proposed expenditures to specific activities to meet project goals.  
(Up to ten (10) points)

- A. Budget and budget narrative evidencing these criteria is extensive (10 points)
- B. Budget and budget narrative evidencing these criteria is stronger than average (8-9 points)
- C. Budget and budget narrative evidencing these criteria is adequate (6-7 points)
- D. Budget and budget narrative evidencing these criteria is limited (1-5 point)
- E. Budget and budget narrative on evidencing these criteria is nonexistent (0 points)

**Score:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
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◆◆◆ Each Section must Contain Comments Justifying the Score Given ◆◆◆

Total points (out of 100) \_\_\_\_\_

## Required Terms and Certifications

Appendix A: Standard Clauses for NYS Contracts  
Appendix A-1G: Agency-Specific Clauses  
Appendix Z: Required Certifications and Assurances

Attachment 1: Application Checklist  
Attachment 2: Application Cover Page  
Attachment 3: M/WBE Goal Calculation Worksheet  
Attachment 4: M/WBE Cover Letter  
Attachment 5: M/WBE Utilization Plan (M/WBE 100)  
Attachment 6: M/WBE Subcontractor/Suppliers Notice of Intent to Participate (M/WBE 102)  
Attachment 7: M/WBE Contractor Good Faith Efforts Certification (M/WBE 105)  
Attachment 8: M/WBE Contractor Unavailable Certification (M/WBE 105A)  
Attachment 9: Request for Waiver Form (M/WBE 101)  
Attachment 10: Equal Employment Opportunity Staffing Plan (EEO 100) Instruction

**Appendix Z**

### New York State Education Department

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#### ASSURANCES AND CERTIFICATIONS FOR FEDERAL PROGRAM FUNDS

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The following assurances and certifications may be a component of your application/contract. By signing the certification on the application cover page, you are ensuring accountability and compliance with applicable State and Federal laws, regulations, and grants management requirements. *Certain of these assurances and/or certifications may not be applicable to your project or program. If you have questions, please contact the New York State Education Department.*

#### Federal Assurances and Certifications, General:

- Assurances – Non-Construction Programs
- Assurances - Construction Programs
- Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters
- Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion— Lower Tier Covered Transactions
- Certification Regarding Drug-Free Workplace Requirements

#### Federal Assurances and Certifications, WIOA:

The following may be required as a condition for receiving these Federal funds under the Workforce Innovation and Opportunity Act (“WIOA”):

- Supported Employment Assurances

**The applicant/contractor, by and through the undersigned authorized representative, assures that (1) it is familiar with, (2) it is complying with, and (3) it will continue to comply with State and Federal laws which apply to the applicant's/contractor's activities or which impose restrictions on the applicant's/contractor's use of funding or grants, including, but not limited to, all assurances and certifications required pursuant to WIOA.**

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## ASSURANCES - NON-CONSTRUCTION PROGRAMS

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**Note:** Certain Federal awarding agencies may require applicants/contractors to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant/contractor, and by signing the Application Cover Page, I certify that the applicant/contractor, if applicable:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 *et seq.*), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328), which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874) and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for Federally-assisted construction subagreements.
10. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 *et seq.*); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 *et seq.*); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1721 *et seq.*) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 *et seq.*).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 *et seq.*) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 *et seq.*), which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and 2 CFR Part 200, Audits of States, Local Governments, and Non-Profit Organizations.
18. Will comply with Section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act.
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
20. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (“TVPA”) of 2000, as amended (22 U.S.C. § 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

**Standard Form 424B (Rev. 7-97), Prescribed by 2 CFR Part 200, Authorized for Local Reproduction,  
as amended by New York State Education Department**

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## ASSURANCES - CONSTRUCTION PROGRAMS

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**Note:** Certain Federal awarding agencies may require applicants/contractors to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant/contractor, and by signing the Application Cover Page, I certify that the applicant/contractor, if applicable:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
4. Will comply with the requirements of the assistive awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or represents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint poisoning Prevention Act (42 U.S.C. §§ 4801 et. seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 *et seq.*), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
11. Will comply, or has already complied, with the requirements of Titles II and III of the uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328), which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
13. Will comply with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874) and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for Federally-assisted construction subagreements.
14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 *et seq.*); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 *et seq.*); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1721 *et seq.*) related to protecting components or potential components of the national wild and scenic rivers system.
17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 *et seq.*).
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

**Standard Form 424D (Rev. 7-97), Authorized for Local Reproduction, as amended by New York State Education Department**

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## **CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS**

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These certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Education determines to award the covered transaction, grant, or cooperative agreement.

### **1. LOBBYING**

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 2 CFR Part 200, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 34 CFR Sections 82.105 and 82.110, the applicant/contractor certifies that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement.
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

### **2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

This certification is required by OMB Guidelines to Agencies on Governmentwide Debarment and Suspension (Nonprocurement), 2 CFR Part 180

A. The applicant/contractor certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency.
- (b) Have not within a three-year period preceding this application been convicted of any offenses listed in 2 CFR §180.800(a) or had a civil judgment rendered against them for one of those offenses within that time period.
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses listed in 2 CFR §180.800(a).
- (d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default.

B. Where the applicant/contractor is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTARY EXCLUSION—LOWER TIERED COVERED TRANSACTIONS

The terms “debarment,” “suspension,” “excluded,” “disqualified,” “ineligible,” “participant,” “person,” “principal,” “proposal,” and “voluntarily excluded” as used in this certification have the meanings set forth in 2 CFR Part 180, Subpart I, “Definition.” A transaction shall be considered a “covered transaction” if it meets the definition in 2 CFR Part 180 Subpart B, “What is a covered transaction?”

A. The applicant/contractor certifies that it and its principals:

- (a) Upon approval of their application, in accordance with 2 CFR Part 180 Subpart C, they shall not enter into any lower tier nonprocurement covered transaction with a person without verifying that the person is not excluded or disqualified unless authorized by USDOE.
- (b) Will obtain an assurance from prospective participants in all lower tier covered nonprocurement transactions and in all solicitations for lower tier covered nonprocurement transactions that the participants will comply with the provisions of 2 CFR Part 180 subparts A,B, C and I.
- (c) Will provide immediate written notice to the New York State Education Department if at any time the applicant/contractor and its principals learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

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## CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

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### Certification Regarding Drug-Free Workplace Requirements

The applicant/contractor certifies that it will provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing a drug-free awareness program to inform employees about—
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after each conviction;
- (e) Notifying the agency within ten days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;
- (f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—
  - (1) Taking appropriate personnel action against such an employee, up to and including termination; or
  - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

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**WORKFORCE INNOVATION AND OPPORTUNITY ACT (“WIOA”)  
ASSURANCES AND CERTIFICATIONS**

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**Supported Employment Assurances**

If applicable, the applicant/contractor may be required to acknowledge the following and/or provide the following information and assurances:

1. Funds made available for supported employment will only be used to provide supported employment services to individuals who are eligible to receive such services.
2. The comprehensive assessments of individuals with significant disabilities, including youth with the most significant disabilities, will include consideration of supported employment as an appropriate employment outcome.
3. An individualized plan for employment will be developed and updated in order to (a) specify the supported employment services to be provided, including, as appropriate, for youth with the most significant disabilities, transition services and pre-employment transition services; (b) specify the expected extended services needed, including the extended services that may be provided to youth with the most significant disabilities, in accordance with an approved individualized plan for employment, for a period not to exceed four years; and (c) identify, as appropriate, the source of extended services, which may include natural supports, or indicate that it is not possible to identify the source of extended services at the time the individualized plan for employment is developed.
4. The State will use funds provided under 29 U.S. Code Subchapter VI only to supplement, and not supplant, the funds provided under 29 U.S. Code Subchapter I, in providing supported employment services specified in the individualized plan for employment.
5. Services provided under an individualized plan for employment will be coordinated with services provided under other individualized plans established under other Federal or State programs.
6. To the extent jobs skills training is provided, the training will be provided on site.
7. Supported employment services will include placement in an integrated setting based on the unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of individuals with the most significant disabilities.
8. The designated State agencies will expend not more than 2.5 percent of the allotment of the State under 29 U.S. Code Subchapter VI for administrative costs.
9. With respect to supported employment services provided to youth with the most significant disabilities, the designated State agency will provide, directly or indirectly through public or private entities, non-Federal contributions in an amount that is not less than 10 percent of the costs of carrying out such services.

**As the duly authorized representative of the applicant/contractor, I hereby certify that the applicant/contractor will comply with the above assurances and certifications. The applicant/contractor will provide immediate written notice to the NYSED Contract Administration Unit if, at any time, the applicant/contractor learns that its assurance or certification was erroneous when submitted or has become erroneous by reason of changed circumstances.**

## Application Checklist

Listed below are the required documents for a complete application package, in the order that they should be submitted. Use this checklist to ensure that your application submission is complete and in compliance with application instructions.

Required Documents	Checked-Applicant	Checked –SED	
Application Cover Page with Original Signature of Chief Administrative Officer	<input type="checkbox"/>	<input type="checkbox"/>	
<a href="#">Payee Information Form</a> (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Application Checklist	<input type="checkbox"/>	<input type="checkbox"/>	
Proposal Narrative	<input type="checkbox"/>	<input type="checkbox"/>	
Budget (signature required)	<input type="checkbox"/>	<input type="checkbox"/>	
Budget Narrative	<input type="checkbox"/>	<input type="checkbox"/>	
Worker’s Compensation Documentation (encouraged)	<input type="checkbox"/>	<input type="checkbox"/>	
Disability Benefits Documentation (encouraged)	<input type="checkbox"/>	<input type="checkbox"/>	
Is the applicant prequalified, if required? (While no documentation is required with the application, the applicant may be required to prequalify in order to be eligible for this grant opportunity)	<input type="checkbox"/>	<input type="checkbox"/>	
<b>M/WBE Documents Package (original signatures required)</b> <input type="checkbox"/> Full Participation <input type="checkbox"/> Request Partial Waiver <input type="checkbox"/> Request Total Waiver			
<b>Forms Required</b>			
Type of Form	Full Participation	Request Partial Waiver	Request Total Waiver
Calculation of M/WBE Goal Amount	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M/WBE Cover Letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>M/WBE 100</b> Utilization Plan	<input type="checkbox"/>	<input type="checkbox"/>	N/A
<b>M/WBE 102</b> Notice of Intent to Participate	<input type="checkbox"/>	<input type="checkbox"/>	N/A
<b>M/WBE 105</b> Contractor’s Good Faith Efforts	N/A	<input type="checkbox"/>	<input type="checkbox"/>
<b>M/WBE 101</b> Request for Waiver Form and Instructions	N/A	<input type="checkbox"/>	<input type="checkbox"/>
<b>EE0 100</b> Staffing Plan and Instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>SED Comments:</b>			
Has the applicant complied with the application instructions? <input type="checkbox"/> Yes <input type="checkbox"/> No			
SED Reviewer: _____ Date: _____			

**Statewide Systems Advocacy Network Centers  
Application Cover Page**

**Agency Code**

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Name Applicant agency:	Name and Title of Contact Person:
Address:	Telephone:
City:                      ZIP Code:	Fax:
County:	E-Mail:
<p>I hereby certify that I am the applicant’s chief school/administrative officer and that the information contained in this application is, to the best of my knowledge, complete and accurate. I further certify, to the best of my knowledge, that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, application guidelines and instructions, Assurances, Certifications, terms and conditions of the Master Contract for Grants, and that the requested budget amounts are necessary for the implementation of this project. It is understood by the applicant that this application constitutes an offer and, if accepted by the NYS Education Department or renegotiated to acceptance, will form a binding agreement. It is also understood by the applicant that immediate written notice will be provided to the grant program office if at any time the applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.</p>	
Original Signature of Chief Administrative Officer:	Typed Name of Chief Administrative Officer:
Date:	

M/WBE Documents  
**M/WBE Goal Calculation Worksheet**  
 (This form should reflect Year 1 budget totals)

**RFP # and Title:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

The M/WBE participation for this grant is 30% of each applicant's total discretionary non-personal service budget for each year of the grant. Discretionary non-personal service budget is defined as the total annual budget, excluding the sum of funds budgeted for direct personal services (i.e., professional and support staff salaries) and fringe benefits, as well as rent, lease, utilities, and indirect costs, if these are allowable expenditures. Please complete the following table to determine the dollar amount of the M/WBE goal for this grant application.

	<b>Budget Category</b>	<b>Amount budgeted for items excluded from M/WBE calculation</b>	<b>Totals</b>
1.	<b>Total Budget</b>		
2.	<b>Professional Salaries</b>		
3.	<b>Support Staff Salaries</b>		
4.	<b>Fringe Benefits</b>		
5.	<b>Indirect Costs</b>		
6.	<b>Rent/Lease/Utilities*</b>		
7.	<b>Sum of lines 2, 3, 4, 5, and 6</b>		
8.	<b>Line 1 minus Line 7</b>		
9.	<b>M/WBE Goal percentage (30%)</b>		<b>0.30</b>
10.	<b>Line 8 multiplied by Line 9 = MWBE goal amount</b>		

\*If not included in #5

**M/WBE COVER LETTER Minority & Women-Owned Business Enterprise Requirements**

**NAME OF GRANT PROGRAM** \_\_\_\_\_

**NAME OF APPLICANT** \_\_\_\_\_

In accordance with the provisions of Article 15-A of the NYS Executive Law, 5 NYCRR Parts 140-145, Section 163 (6) of the NYS Finance Law and Executive Order #8 and in fulfillment of the New York State Education Department (NYSED) policies governing Equal Employment Opportunity and Minority and Women-Owned Business Enterprise (M/WBE) participation, it is the intention of the New York State Education Department to provide real and substantial opportunities for certified Minority and Women-Owned Business Enterprises on all State contracts. It is with this intention that NYSED has assigned M/WBE participation goals to this contract.

In an effort to promote and assist in the participation of certified M/WBEs as subcontractors and suppliers on this project for the provision of services and materials, the bidder is required to comply with NYSED's participation goals through one of the three methods below. Please indicate which one of the following is included with the M/WBE Documents Submission:

- Full Participation – No Request for Waiver (PREFERRED)
- Partial Participation – Partial Request for Waiver
- No Participation – Request for Complete Waiver

By my signature on this Cover Letter, I certify that I am authorized to bind the Bidder's firm contractually.
Signature/Date
Typed or Printed Name of Authorized Representative of the Firm
Typed or Printed Title/Position of Authorized Representative of the Firm

**M/WBE UTILIZATION PLAN**

**INSTRUCTIONS:** All bidders/applicants submitting responses to this procurement/project must complete this M/WBE Utilization Plan unless requesting a total waiver and submit it as part of their proposal/application. The plan must contain detailed description of the services to be provided by each Minority and/or Women-Owned Business Enterprise (M/WBE) identified by the bidder/applicant.

Bidder/Applicant's Name \_\_\_\_\_

Telephone/Email: \_\_\_\_\_/\_\_\_\_\_

Address \_\_\_\_\_

Federal ID No.: \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

RFP No.: \_\_\_\_\_

Certified M/WBE	Classification (check all applicable)	Description of Work (Subcontracts/Supplies/Services)	Annual Dollar Value of Subcontracts/Supplies/Services
NAME  ADDRESS  CITY, ST, ZIP  PHONE/E-MAIL  FEDERAL ID No.	NYS ESD Certified  MBE _____  WBE _____		\$ _____
NAME  ADDRESS  CITY, ST, ZIP  PHONE/E-MAIL  FEDERAL ID No.	NYS ESD Certified  MBE _____  WBE _____		\$ _____

PREPARED BY (Signature) \_\_\_\_\_

DATE \_\_\_\_\_

**SUBMISSION OF THIS FORM CONSTITUTES THE BIDDER/APPLICANT'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-1, 5 NYCRR PART 143 AND THE ABOVE REFERENCE SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR PROPOSAL/APPLICATION DISQUALIFICATION.**

NAME AND TITLE OF PREPARER: \_\_\_\_\_  
(print or type)

TELEPHONE/E-MAIL \_\_\_\_\_

DATE \_\_\_\_\_

REVIEWED BY _____	DATE _____
UTILIZATION PLAN APPROVED YES/NO	DATE _____
NOTICE OF DEFICIENCY ISSUED YES/NO	DATE _____
NOTICE OF ACCEPTANCE ISSUED YES/NO	DATE _____

**M/WBE SUBCONTRACTORS AND SUPPLIERS  
NOTICE OF INTENT TO PARTICIPATE**

INSTRUCTIONS: Part A of this form must be completed and signed by the Bidder/Applicant unless requesting a total waiver. Parts B & C of this form must be completed by MBE and/or WBE subcontractors/suppliers. The Bidder/Applicant must submit a separate M/WBE Notice of Intent to Participate form for each MBE or WBE as part of the proposal/application.

Bidder/Applicant Name: \_\_\_\_\_ Federal ID No.: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Authorized Representative of Bidder/Applicant's Firm \_\_\_\_\_  
Print or Type Name and Title of Authorized Representative of Bidder/Applicant's Firm

Date: \_\_\_\_\_

**PART B - THE UNDERSIGNED INTENDS TO PROVIDE SERVICES OR SUPPLIES IN CONNECTION WITH THE ABOVE PROCUREMENT/APPLICATION:**

Name of M/WBE: \_\_\_\_\_ Federal ID No.: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

City, State, ZIP Code \_\_\_\_\_ E-mail: \_\_\_\_\_

**BRIEF DESCRIPTION OF SERVICES OR SUPPLIES TO BE PERFORMED BY MBE OR WBE:**

**DESIGNATION:** \_\_\_ MBE Subcontractor \_\_\_ WBE Subcontractor \_\_\_ MBE Supplier \_\_\_ WBE Supplier

**PART C - CERTIFICATION STATUS (CHECK ONE):**

\_\_\_\_\_ The undersigned is a certified M/WBE by the New York State Division of Minority and Women-Owned Business Development (MWBD).

**THE UNDERSIGNED IS PREPARED TO PROVIDE SERVICES OR SUPPLIES AS DESCRIBED ABOVE AND WILL ENTER INTO A FORMAL AGREEMENT WITH THE BIDDER/APPLICANT CONDITIONED UPON THE BIDDER/APPLICANT'S EXECUTION OF A CONTRACT WITH THE NYS EDUCATION DEPARTMENT.**

The estimated dollar amount of the agreement \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Representative of M/WBE Firm

\_\_\_\_\_  
Printed or Typed Name and Title of Authorized Representative

\_\_\_\_\_  
Date

**M/WBE CONTRACTOR GOOD FAITH EFFORTS CERTIFICATION (FORM 105)**

PROJECT/CONTRACT # \_\_\_\_\_

I, \_\_\_\_\_  
(Bidder/Applicant)

\_\_\_\_\_ of \_\_\_\_\_  
(Title) (Company)

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
(Address) (Telephone Number)

do hereby submit the following as *evidence* of our good faith efforts to retain certified minority- and women-owned business enterprises:

(1) Copies of its solicitations of certified minority- and women-owned business enterprises and any responses thereto;

(2) If responses to the contractor's solicitations were received, but a certified minority- or woman-owned business enterprise was not selected, the specific reasons that such enterprise was not selected;

(3) Copies of any advertisements for participation by certified minority- and women-owned business enterprises timely published in appropriate general circulation, trade and minority- or women-oriented publications, together with the listing(s) and date(s) of the publication of such advertisements;

(4) Copies of any solicitations of certified minority- and/or women-owned business enterprises listed in the directory of certified businesses;

(5) The dates of attendance at any pre-bid, pre-award, or other meetings, if any, scheduled by the State agency awarding the State contract, with certified minority- and women-owned business enterprises which the State agency determined were capable of performing the State contract scope of work for the purpose of fulfilling the contract participation goals;

(6) Information describing the specific steps undertaken to reasonably structure the contract scope of work for the purpose of subcontracting with, or obtaining supplies from, certified minority- and women-owned business enterprises.

(7) Describe any other action undertaken by the bidder to document its good faith efforts to retain certified minority - and women-owned business enterprises for this procurement

Submit additional pages as needed.

\_\_\_\_\_  
Authorized Representative Signature

\_\_\_\_\_  
Date

**M/WBE CONTRACTOR UNAVAILABLE CERTIFICATION**

**RFP#/PROJECT NAME** \_\_\_\_\_

I, \_\_\_\_\_  
 (Authorized Representative) (Title) (Bidder/Applicant's Company)

\_\_\_\_\_  
 (Address) (\_\_\_\_\_) (Phone)

certify that the following New York State Certified Minority/Women Business Enterprises were contacted to obtain a quote for work to be performed on the abovementioned project/contract.

List of date, name of M/WBE firm, telephone/e-mail address of M/WBEs contacted, type of work requested, estimated budgeted amount for each quote requested.

<u>DATE</u>	<u>M/WBE NAME</u>	<u>PHONE/EMAIL</u>	<u>TYPE OF WORK</u>	<u>ESTIMATED BUDGET</u>	<u>REASON</u>
1.					
2.					
3.					
4.					
5.					

To the best of my knowledge and belief, said New York State Certified Minority/Women Business Enterprise contractor(s) was/were not selected, unavailable for work on this project, or unable to provide a quote for the following reasons: Please check appropriate reasons given by each MBE/WBE firm contacted above.

- \_\_\_\_\_ **A.** Did not have the capability to perform the work
- \_\_\_\_\_ **B.** Contract too small
- \_\_\_\_\_ **C.** Remote location
- \_\_\_\_\_ **D.** Received solicitation notices too late
- \_\_\_\_\_ **E.** Did not want to work with this contractor
- \_\_\_\_\_ **F.** Other (give reason) \_\_\_\_\_

\_\_\_\_\_  
**Authorized Representative Signature** **Date** **Print Name**

**REQUEST FOR WAIVER FORM****BIDDER/APPLICANT NAME:****TELEPHONE:****ADDRESS:****EMAIL:****FEDERAL ID NO.:****CITY, STATE, ZIP CODE:****RFP#/PROJECT NO.:**

**INSTRUCTIONS:** By submitting this form and the required information, the bidder/applicant certifies that Good Faith Efforts have been taken to promote M/WBE participation pursuant to the M/WBE goals set forth under this RFP/Contract. Please see Page 2 for additional requirements and document submission instructions.

<b>BIDDER/APPLICANT IS REQUESTING (check all that apply):</b>			
<input type="checkbox"/>	<b>MBE Waiver</b> - A waiver of the MBE goal for this procurement is requested.	<input type="checkbox"/>	<b>WBE Waiver</b> - A waiver of the WBE goal for this procurement is requested.
<input type="checkbox"/>	<b>Total</b>	<input type="checkbox"/>	<b>Partial</b> _____%
<input type="checkbox"/>	<b>Total</b>	<input type="checkbox"/>	<b>Partial</b> _____%

PREPARED BY (*Signature*): \_\_\_\_\_

DATE: \_\_\_\_\_

**SUBMISSION OF THIS FORM CONSTITUTES THE BIDDER/APPLICANT'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 143, AND THE ABOVE REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR PROPOSAL DISQUALIFICATION.**

<b>NAME OF PREPARER:</b>	<b>FOR AUTHORIZED USE ONLY</b>
<b>TITLE OF PREPARER:</b>	REVIEWED BY: _____
<b>TELEPHONE:</b>	DATE: _____
<b>EMAIL:</b>	<b>WAIVER GRANTED</b> <input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b>
	<input type="checkbox"/> <b>TOTAL WAIVER</b> <input type="checkbox"/> <b>PARTIAL WAIVER</b>
	<input type="checkbox"/> <b>NOTICE OF DEFICIENCY</b>
	<input type="checkbox"/> <b>CONDITIONAL WAIVER</b>
	COMMENTS:

**M/WBE 101**

## REQUIREMENTS AND DOCUMENT SUBMISSION INSTRUCTIONS

**When completing the Request for Waiver Form, please check all boxes that apply. To be considered, the Request for Waiver Form must be accompanied by documentation for items 1-11, as listed below. If a Waiver Pending ESD Certification is requested, please see Item 11 below. Copies of the following information and all relevant supporting documentation must be submitted along with the request.**

1. A statement setting forth your basis for requesting a partial or total waiver.
2. The names of general circulation, trade association, and M/WBE-oriented publications in which you solicited certified M/WBEs for the purposes of complying with your participation goals.
3. A list identifying the date(s) that all solicitations for certified M/WBE participation were published in any of the above publications.
4. A list of all certified M/WBEs appearing in the NYS Directory of Certified Firms that were solicited for purposes of complying with your certified M/WBE participation levels.
5. Copies of notices, dates of contact, letters, and other correspondence as proof that solicitations were made in writing and copies of such solicitations, or a sample copy of the solicitation if an identical solicitation was made to all certified M/WBEs.
6. Provide copies of responses made by certified M/WBEs to your solicitations.
7. Provide a description of any contract documents, plans, or specifications made available to certified M/WBEs for purposes of soliciting their bids and the date and manner in which these documents were made available.
8. Provide documentation of any negotiations between you, the Bidder/Applicant and the M/WBEs undertaken for purposes of complying with the certified M/WBE participations goals.
9. Provide any other information you deem relevant that may help us in evaluating your request for a waiver.
10. Provide the name, title, address, telephone number and email address of the Bidder/Applicant's representative authorized to discuss and negotiate this waiver request.
11. Copy of notice of application receipt issued by Empire State Development (ESD).

**NOTE: Unless a Total Waiver has been granted, Bidder/Applicant will be required to submit all reports and documents pursuant to the provisions set forth in the procurement and/or contract, as deemed appropriate by NYSED, to determine M/WBE compliance.**

**EQUAL EMPLOYMENT OPPORTUNITY - STAFFING PLAN (Instructions on Page 2)**

Applicant Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Federal ID No.: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Project No: \_\_\_\_\_

Report includes:

Work force to be utilized on this contract OR

Applicant's total work force

**Enter the total number of employees in each classification in each of the EEO-Job Categories identified.**

EEO - Job Categories	Total Work Force	Race/Ethnicity - report employees in only one category																	
		Hispanic or Latino		Not-Hispanic or Latino											Female				
				Male															
		Male	Female	White	African-American or Black	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races	Disabled	Veteran	White	African-American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races	Disabled	Veteran
Executive/Senior Level Officials and Managers																			
First/Mid-Level Officials and Managers																			
Professionals																			
Technicians																			
Sales Workers																			
Administrative Support Workers																			
Craft Workers																			
Operatives																			
Laborers and Helpers																			
Service Workers																			
TOTAL																			

PREPARED BY (Signature): \_\_\_\_\_  
 NAME AND TITLE OF PREPARER: \_\_\_\_\_

DATE: \_\_\_\_\_  
 TELEPHONE/EMAIL: \_\_\_\_\_

**EEO 100**

**STAFFING PLAN INSTRUCTIONS**

General Instructions: All Bidders/Applicants in the proposal/application must complete an EEO Staffing Plan (EEO 100) and submit it as part of the package. Where the work force to be utilized in the performance of the State contract/project can be separated out, the Bidder/Applicant shall complete this form only for the anticipated work force to be utilized on the State contract/project. Where the work force to be utilized in the performance of the State contract/project cannot be separated out, the Bidder/Applicant shall complete this form for Bidder/Applicant's total work force.

**Instructions for Completing:**

1. Enter the Project number that this report applies to, along with the name, address, and federal ID number of the Bidder.
2. Check the appropriate box to indicate if the work force being reported is just for the contract/project or the Bidder/Applicant's total work force.
3. Check off the appropriate box to indicate if the Bidder completing the report is the contractor or subcontractor.
4. Enter the total work force by EEO job category.
5. Break down the total work force by gender and race/ethnic background and enter under the heading Race/Ethnicity. Contact the M/WBE Coordinator, [mwbegrants@nysed.gov](mailto:mwbegrants@nysed.gov), if you have any questions.
6. Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in designated areas.

**RACE/ETHNIC IDENTIFICATION**

For purposes of this form NYSED will accept the definitions of race/ethnic designations used by the federal Equal Employment Opportunity Commission (EEOC), as those definitions are described below or amended hereafter. (Be advised these terms may be defined differently for other purposes under NYS statutory, regulatory, or case law). Race/ethnic designations as used by the EEOC do not denote scientific definitions of anthropological origins. For the purposes of this report, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. The race/ethnic categories for this survey are:

- **Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- **White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.
- **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- **Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.
- **Disabled** - Any person who has a physical or mental impairment that substantially limits one or more major life activity; has a record of such an impairment; or is regarded as having such an impairment
- **Vietnam Era Veteran** - a veteran who served at any time between and including January 1, 1963 and May 7, 1975.

**EEO 100**