

EASTERN AREA WORKFORCE DEVELOPMENT BOARD

A Proud Partner of the American Job Center Network

Workforce Innovation and Opportunity Act

Service Provider

Attachments & Certifications

**725 Sixth Street, Box 8, Albuquerque, NM 87102
Phone: 505-343-7612 Fax: 505-343-7625**

Request for Proposal Service Provider Cover Sheet

Bid Response: _____ Adult/DW _____ Youth _____ Both

Proposer: _____

Address: _____

Federal Taxpayer Identification Number: _____

Contact Name: _____

Telephone: _____

Email Address: _____

Fax: _____

Authorized Signature: _____

Title: _____

Print Name: _____

Date: _____

Proposed Budget

A. Salaries and Wages:

Position/Title	# of Positions	Hourly Rate	Total Hours per week	Hours to be Charged to One-Stop Operator	Total cost charged to Operator

B. Supplies/Office Expense

Description of expense	Total cost of Expense	Percentage of cost to Operator	Total cost charged to Operator

Attach additional pages and information as necessary.

Certifications & Assurances

- D1 Required Certifications and Documents Information**
- D2 Certification on Debarment, Suspension and Other Matters**
- D3 Campaign Contribution Disclosure Form**
- D4 Certification of Drug Free Workplace**
- D5 Certification of Financial Capability**
- D6 Certification Regarding Lobbying**
- D7 New Mexico Preference Resident Veterans Certification**
- D8 Organizational Reference Questionnaire**
- D9 Certification on Non-Discrimination and Equal Opportunity**
- D10 Assurances**

By signing below, I hereby certify that the organization on behalf of which I am signing agrees to abide by the above referenced and attached Certifications and/or Assurances:

Typed Name: _____ **Title:** _____

Signature: _____ **Date:** _____

REQUIRED CERTIFICATIONS AND DOCUMENTS INFORMATION

Answer the questions as they apply to your organization. Circle the correct response, fill in the blank or place an "x" in the blank(s) as appropriate. Additional explanation(s) may be attached to this page, citing the item being referenced.

1. Is the organization owned or controlled by a parent company? (Not applicable to a public entities)
YES NO N/A
2. Federal Employer's ID Number (FEIN) _____New Mexico UI NO.
3. Is the organization a ___ public agency, ___corporation ___sole proprietorship, ___profit or ___ not for profit?
4. Is the organization a small and/or minority/female-owned business? (Not applicable to public entities)
YES NO N/A
5. Is the organization registered with state or local licensing authorities? **YES NO N/A**
6. What is the name of the person(s) who can bind the organization contractually and/or is authorized to negotiate on behalf of the organization?

NAME _____ TITLE: _____
ADDRESS _____ CITY _____, NM ZIP _____
TELEPHONE: _____ FAX: _____
7. Is your organization bound by federal, state, or local affirmative action/EEO rules? **YES NO N/A**
(Note: a statement to abide by all affirmative action guidelines will be attached to contracts)
8. Is your organization a Drug Free Workplace? **YES NO**
9. Is your organization now, or has it ever been debarred or suspended under federal and/or state rulings from participating in receipt of funds under a contract? **YES NO**
10. Do you certify that your organization will not enter into contracts with subcontractors who are debarred or suspended from federal and/or state transactions? **YES NO**
11. The organization agrees not to use contract funds to lobby. **YES NO**

12. Does the organization have the financial capacity and accounting systems necessary for the project? **YES NO**
13. Does the organization carry worker's compensation coverage for its employees? **YES NO N/A**
14. Are you able to provide audits, financial statements and/or other proof of fiscal accountability and stability to the Eastern Area Workforce Development Board? **YES NO**. If "no" attach explanation.
15. Does the organization have any **financial relationship** with any member of the Board of Directors, its standing committees and/or staff of the Eastern Area Workforce Development Board. **YES NO**
If "yes" attach an explanation.

CERTIFICATION ON DEBARMENT, SUSPENSION AND OTHER MATTERS

1. We certify to the best of our knowledge that we:
 - A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a Federal department or agency.
 - B. Have not within a three-year period been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - C. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or local) within commission of any of the offense enumerated in paragraph (1)(B) of this certification;
 - D. Have not within a three-year period had one or more public transactions (Federal, State or local) terminated for cause or default.
2. Where unable to certify to any of the statements in this certification, such prospective subrecipient shall attach a written explanation to this certification.

CAMPAIGN CONTRIBUTION DISCLOSURE FORM

Pursuant to NMSA 1978, § 13-1-191.1 (2006), any person seeking to enter into a contract with any state agency or local public body for professional services, a design and build project delivery system, or the design and installation of measures the primary purpose of which is to conserve natural resources must file this form with that state agency or local public body. This form must be filed even if the contract qualifies as a small purchase or a sole source contract. The prospective contractor must disclose whether they, a family member or a representative of the prospective contractor has made a campaign contribution to an applicable public official of the state or a local public body during the two years prior to the date on which the contractor submits a proposal or, in the case of a sole source or small purchase contract, the two years prior to the date the contractor signs the contract, if the aggregate total of contributions given by the prospective contractor, a family member or a representative of the prospective contractor to the public official exceeds two hundred and fifty dollars (\$250) over the two year period.

Furthermore, the state agency or local public body shall void an executed contract or cancel a solicitation or proposed award for a proposed contract if: 1) a prospective contractor, a family member of the prospective contractor, or a representative of the prospective contractor gives a campaign contribution or other thing of value to an applicable public official or the applicable public official's employees during the pendency of the procurement process or 2) a prospective contractor fails to submit a fully completed disclosure statement pursuant to the law.

THIS FORM MUST BE FILED BY ANY PROSPECTIVE CONTRACTOR WHETHER OR NOT THEY, THEIR FAMILY MEMBER, OR THEIR REPRESENTATIVE HAS MADE ANY CONTRIBUTIONS SUBJECT TO DISCLOSURE.

The following definitions apply:

“Applicable public official” means a person elected to an office or a person appointed to complete a term of an elected office, who has the authority to award or influence the award of the contract for which the prospective contractor is submitting a competitive sealed proposal or who has the authority to negotiate a sole source or small purchase contract that may be awarded without submission of a sealed competitive proposal.

“Campaign Contribution” means a gift, subscription, loan, advance or deposit of money or other thing of value, including the estimated value of an in-kind contribution, that is made to or received by an applicable public official or any person authorized to raise, collect or expend contributions on that official’s behalf for the purpose of electing the official to either statewide or local office. “Campaign Contribution” includes the payment of a debt incurred in an election campaign, but does not include the value of services provided without compensation or unreimbursed travel or other personal expenses of individuals who volunteer a portion or all of their time on behalf of a candidate or political committee, nor does it include the administrative or solicitation expenses of a political committee that are paid by an organization that sponsors the committee.

“Family member” means spouse, father, mother, child, father-in-law, mother-in-law, daughter-in-law or son-in-law.

“Pendency of the procurement process” means the time period commencing with the public notice of the request for proposals and ending with the award of the contract or the cancellation of the request for proposals.

“Person” means any corporation, partnership, individual, joint venture, association or any other private legal entity.

“Prospective contractor” means a person who is subject to the competitive sealed proposal process set forth in the Procurement Code or is not required to submit a competitive sealed proposal because that person qualifies for a sole source or a small purchase contract.

“Representative of a prospective contractor” means an officer or director of a corporation, a member or manager of a limited liability corporation, a partner of a partnership or a trustee of a trust of the prospective contractor.

DISCLOSURE OF CONTRIBUTIONS:

Contribution Made by: _____

Relation to Prospective Contractor: _____

Name of Applicable Public Official: _____

Date Contribution(s) Made: _____

Amount(s) of Contribution(s)

Nature of Contribution(s)

Purpose of Contribution(s)

(Attach extra pages if necessary)

Signature

Date

Title (position)

—OR—

NO CONTRIBUTIONS IN THE AGGREGATE TOTAL OVER TWO HUNDRED FIFTY DOLLARS (\$250) WERE MADE to an applicable public official by me, a family member or representative.

Signature

Date

Title (Position)

DRUG-FREE WORKPLACE CERTIFICATION

We will provide a Drug Free Workplace in compliance with the Drug Free Workplace Act of 1988. The unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited on our premises or any of its facilities. Any employee who violates this prohibition will be subject to disciplinary action with this policy.

FINANCIAL CAPABILITY CERTIFICATION

1. We have a financial management system capable of tracking and accounting for funds received and disbursed? YES NO

If No, explain

2. We have the fiscal capability of providing services pending payment or reimbursement?
 YES NO

If No, explain

3. Have there been any finding with disallowed costs from prior monitoring or audit reviews:
 YES NO

If Yes, Explain (Attach additional sheet if necessary)

4. Have all findings from prior audits been resolved? YES NO NA

Explain the resolution (Attach additional page if necessary)

CERTIFICATION REGARDING LOBBYING

We certify, to the best of our knowledge and belief, that:

1. No Federal appropriate funds have been paid or will be paid, by or on behalf of any person for influencing or attempting to influence an officer or employee of an agency, a member of congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any non-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 contract, grant, loan or cooperating agreement, the undersigned shall complete a submit Standard Form-LL “ Disclosure Form to Report Lobbying,” in accordance with its instructions.
3. We shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants and contracts under grants, loans, and cooperative agreements, and that all sub-recipients shall certify and disclose the same accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, US Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

RESIDENT VETERANS CERTIFICATION

New Mexico Preference Resident Veterans Certification

Reminder, a copy of Resident Veterans Preference Certificate must be submitted with the proposal in order to ensure adequate consideration and application of NMSA 1978, § 13-1-21 (as amended).

_____ (NAME OF CONTRACTOR) hereby certifies the following in regard to application of the resident veterans' preference to this procurement:

Please check one box only

- I declare under penalty of perjury that my business prior year revenue starting January 1 ending December 31 is less than \$1M allowing me the 10% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.
- I declare under penalty of perjury that my business prior year revenue starting January 1 ending December 31 is more than \$1M but less than \$5M allowing me the 8% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.
- I declare under penalty of perjury that my business prior year revenue starting January 1 ending December 31 is more than \$5M allowing me the 7% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.

"I agree to submit a report, or reports, to the State Purchasing Division of the General Services Department declaring under penalty of perjury that during the last calendar year starting January 1 and ending on December 31, the following to be true and accurate:

"In conjunction with this procurement and the requirements of this business' application for a Resident Veteran Business Preference/Resident Veteran Contractor Preference under NMSA 1978, § 13-1-21 or 13-1-22, when awarded a contract which was on the basis of having such veterans' preference, I agree to report to the State Purchasing Division of the General Services Department the awarded amount involved. I will indicate in the report the award amount as a purchase from a public body or as a public works contract from a public body as the case may be.

"I understand that knowingly giving false or misleading information on this report constitutes a crime."

I declare under penalty of perjury that this statement is true to the best of my knowledge. I understand that giving false or misleading statements about material fact regarding this matter constitutes a crime.

(Signature of Business Representative) * (Date)

*Must be an authorized signatory for the Business. The representations made in checking the boxes constitutes a material representation by the business that is subject to protest and may result in denial of an award or termination of award of the procurement involved if the statements are proven to be incorrect.

ORGANIZATIONAL REFERENCE QUESTIONNAIRE

The State of New Mexico, as a part of the RFP process, requires Offerors to submit a minimum of three (3) business references as required within this document. The purpose of these references is to document Offeror's experience relevant to the scope of work in an effort to establish Offeror's responsibility.

Offeror is required to send the following reference form to each business reference listed. The business reference, in turn, is requested to submit the Reference Form directly to: Tiffany Roth, Procurement Manager, at troth@nmwcc.com by May 7, 2017 for inclusion in the evaluation process. The form and information provided will become a part of the submitted proposal. Business references provided may be contacted for validation of content provided therein.

ORGANIZATIONAL REFERENCE QUESTIONNAIRE

FOR:

(Name of Offeror)

This form is being submitted to your company for completion as a business reference for the company listed above. This form is to be returned to the EAWDB, via e-mail at:

Name: Tiffany Roth EAWDB, Procurement Manager

Address: 725 6th Street
Albuquerque, NM 87102

Telephone: 505-343-7612

Email: troth@nmwcc.com

no later than May 7, 2017 and **must not** be returned to the company requesting the reference.

For questions or concerns regarding this form, please contact the State of New Mexico Procurement Manager listed above. When contacting us, please be sure to include the Request for Proposal number listed at the top of this page.

Company providing reference:	
Contact name and title/position	
Contact telephone number	
Contact e-mail address	
Project description;	
Project dates (starting and ending);	
Technical environment for the project your providing a reference (i.e., Software applications, Internet capabilities, Data communications, Network, Hardware);	

QUESTIONS:

1. In what capacity have you worked with this vendor in the past?

COMMENTS:

2. How would you rate this firm's knowledge and expertise?

____ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

COMMENTS:

3. How would you rate the vendor's flexibility relative to changes in the project scope and timelines?

____ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

COMMENTS:

4. What is your level of satisfaction with hard-copy materials produced by the vendor?

____ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

COMMENTS:

5. How would you rate the dynamics/interaction between the vendor and your staff?

____ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

COMMENTS:

6. Who were the vendor's principal representatives involved in your project and how would you rate them individually? Would you comment on the skills, knowledge, behaviors or other factors on which you based the rating?

(3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

Name: _____ Rating:

Name: _____ Rating:

Name: _____ Rating:

Name: _____ Rating:

COMMENTS:

7. How satisfied are you with the products developed by the vendor?
_____ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable)

COMMENTS:

8. With which aspect(s) of this vendor's services are you most satisfied?

COMMENTS:

9. With which aspect(s) of this vendor's services are you least satisfied?

COMMENTS:

10. Would you recommend this vendor's services to your organization again?

COMMENTS:

NON-DISCRIMINATION AND EQUAL OPPORTUNITY CERTIFICATION

We assure that with respect to the operation of the program or activity and all agreements or arrangements to carry out the program or activity, that we will comply fully with the nondiscrimination and equal opportunity provisions of Title IV, Part A of the Social Security Act as amended by the Balanced Budget Act of 1997, The Workforce Investment Act of 1998, including Title IV of the Civil Rights Act of 1964, as amended; the non-traditional Employment for Women Act of 1973 as amended; the Age Discrimination Act of 1975, as amended; title IX of the Education Amendments of 1972 as amended; and with all applicable requirements imposed by or pursuant to regulations implementing those laws, including but not limited to 29 CFR Part 34.

ASSURANCES

We recognize that we must give assurance for each item below. If we cannot, this proposal will be automatically rejected. These assurances are:

1. We are authorized by our Board of Directors, Trustees or other legally qualified officer, or a owner of this agency or business to submit this proposal.
2. We are not currently on any Federal, State of New Mexico or local debarment list.
3. We will provide records to show that we are fiscally solvent, if needed.
4. We have, or will have, all of the fiscal control and accounting procedures needed to ensure that WIOA funds will be used as required by law and contract.
5. We have additional funding sources and will not be dependent on WIOA funds alone.
6. We will meet all applicable Federal, State and local compliance requirements. These include but are not limited to:
 - Records accurately reflect actual performance.
 - Maintaining record confidentially, as required.
 - Reporting financial participant and performance data as required.
 - Comply with Federal, State non-discriminatory provisions.
 - Meeting requirements of Section 504 of the Rehabilitation Act.
 - Meeting all applicable labor law, including Child Labor Law standards.

We will not:

- Place a client/participant in a position that will displace a current employee.
- Use WIOA money to assist, promote or deter union organizing.
- Use funds to employ or train a person in sectarian activities.
- Use funds for youth in the construction, operation or maintenance of any part of a facility to be use for sectarian instruction or religious worship.
- Use WIOA funds for activities that would interfere with or replace regular academic requirements for eligible youth who are not drop out.
- Use WIOA funds to carry out programs funded under the School-to-Work Opportunities Act of 1994.

We warrant that:

1. We shall establish and maintain a separate book of accounts which identifies any all EAWDB funds received.
2. No WIOA funds received shall be co-mingled with any of our non-WIOA funding.
3. We shall establish and maintain a separate book of accounts for expended WIOA funds including "program income."
4. The cost of pricing data submitted, either actually or indirectly in writing to the EAWDB are accurate, complete and current as of the date of this Agreement.
5. We hereby assure that all of the above are true.