

**Community Development Block Grant
Request for Proposal (RFP)**

Education/Employment Training Program

2011



Neighborhood Outreach Division

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EDUCATION EMPLOYMENT TRAINING PROGRAM OVERVIEW

Actions planned to address this objective: The “Education Employment Training Program” is a new program designed to increase employment opportunities for low income individuals. Career guidance will be provided stimulating interest in employment opportunities that generate a living wage, particularly the occupational field where increased employment opportunities are projected through 2011-12.

Resources: The Community Development Block Grant (CDBG) funds through the City of Decatur, in the amount of \$80,000 are allocated as public service funds for education training services.

Objective: The CDBG objective is to create or foster the expansion of economic opportunities through collaboration. Collaboration of professionals, educational institutions, vocational and businesses, for example, could initiate or expand an education employment training program.

Performance measure: The awarded organization will be required to report on the following information:

- Number of persons assisted with new access to a service AND/OR.
 - New access to a service is when a service is offered for the first time. This indicator would be used when a public service has not previously been available to the targeted households. No such program currently exists in the community and so this is access to a new service.
- Number of persons assisted with improved access to a service.
 - Improved access to a service is when a service is offered, but the public service activity will now allow for the expansion of services, in terms of size, capacity, or location. For example, assume that an existing Meals on Wheels program only provided lunch and the expanded services provides lunch and dinner service. For those elderly households, this would constitute improved access.

By the end of the program, participants should secure gainful employment or increase or expand their current skill levels.

Results: The results should include, but not be limited to: improved quality of life, employment stability, and increased earnings and fringe benefits for low income individuals and an increase in trained or skilled workers.

EDUCATION/EMPLOYMENT TRAINING PROGRAM GUIDELINES

SECTION 1: GENERAL INFORMATION

- 1.1 Purpose:** The City of Decatur ("COD") has Community Development Block Grant (CDBG) funds available in the amount of \$80,000. The funds will be awarded to collaborations which provide a program to expand education, training, and employment opportunities for low/moderate income individuals living in the City of Decatur. The goal of the program shall be to expand the number of individuals who are Employable and equipped to enter the workforce. The primary intent of the **Statement of Qualifications** is to solicit submissions from organizations and institutions in the City of Decatur with successful experience in education and/or training people. Eligible entities must document a history of providing value-added services.

The primary intent of the **Request for Proposal (RFP)** is to seek applications from eligible/qualified applicants to expand education, training and/or employment opportunities.

- 1.2 Authority:** The City will provide funds to a collaboration of qualified sub-recipients to administer a grant program to expand education, training, and employment opportunities for low income residents from the City of Decatur.

SECTION 2: ELIGIBILITY CRITERIA

- 2.1 Eligible Applicants:** Community-based organizations are eligible to apply for this funding. Partnerships and collaboration is strongly encouraged. Memorandums of Understanding/agreements should exist regarding the collaboration. Qualified applicants must demonstrate administrative, technical, and managerial capacity.
- 2.2 Target Population:** Please refer to **Appendix A, Part B.1**, for the target population for this RFP.
- 2.3 Project Location(s):** Education/training to benefit low moderate residents in the City of Decatur.
- 2.4 Eligible Training Activities:** One grant in the amount of \$80,000 will be awarded to perform and/or direct the activities and services detailed in **Appendix A, Part B.3**.
- 2.5 Authority/Approval:** The applicant's signature affixed to the "Representations & Certification" page (**Appendix F**) represents the authorized, responsible representative for the sub-recipient(s).
- 2.6 Legal Compliance:** The grant is available to perform and/or direct the activities and services detailed in **Appendix A, Part B.3**.

SECTION 3: GENERAL PROGRAM INFORMATION

- 3.1 Funding Period:** Funds must be expended by April 15, 2013.
- 3.2 Eligible Expenditures:** Grant funds may be used for costs incurred for personnel, fringes, contractual services, training and development, testing and assessments, recruitment and outreach, supplies and materials (purchases under \$500.00), support services, and other costs which are eligible.
- 3.3 Ineligible Expenditures:** Grant funds may not be used for the following types of expenditures:
- Purchase of real property (land or buildings);
 - Rental of real property (land or buildings) not directly related to the project;
 - Normal operating/administrative expenses, **not directly related to the project**, including:
 - Equipment/machinery lease payments
 - Purchase of consumable/disposable items
- 3.4 Payment Schedule:** The sub-recipient agreement will specify the conditions of payment and the payment schedule. Funds will not be advanced. Funds are on a reimbursement basis for items approved in the budget and identified in the agreement.
- 3.5 Grant Duration/Performance Period:** The grant agreement will specify the beginning and end date of the project.
- 3.6 Reporting Requirements/Project Monitoring:** Grantees will be required to submit fiscal and narrative reports in accordance with the requirements of the grant agreement. The City reserves the right to structure reporting requirements on a project-specific basis. Currently, sub-recipients are required to submit monthly reports by the tenth of each month. The Neighborhood Outreach Division will monitor the grantee's compliance with the terms of the grant agreement.
- 3.7 Grant Audits/Financial Review:** The City may require an audit of the qualified applicant who receives grant funds and the scope of the audit will be outlined in the grant agreement. The City reserves the right to conduct at least one (1) pre-funding financial review to determine the financial soundness of an organization. Applicants should supply a copy of the most recent financial report or audit.
- 3.8 Freedom of Information Act/Confidential information:** Funded proposals are subject to disclosure in response to requests received under provisions of the Freedom of Information Act (5 ILCS 140/1 et seq.). Information that could reasonably be considered proprietary, privileged, or confidential information should be identified as such in the proposal. The City will maintain the confidentiality of that information only to the extent permitted by law.
- 3.9 Ownership/Use of Equipment:** This grant will specifically prohibit the sale, lease, transfer, assignment, or encumbrance, other than original financing of any equipment or material exceeding \$500.00 purchased with grant funds without the express written approval of the City for the duration of the grant term. In the

event of a grantee's failure to comply with this requirement, the grant agreement will provide that the City may, at its discretion, require the grantee to return all grant funds provided by the City, require the grantee to transfer ownership to the City for equipment and material purchased with grant funds, and bar the grantee from consideration for future funding. The sub-recipient will be required to inventory this items if approved.

- 3.10 Dissemination of Information/Technology Transfer:** Sub-recipient will be contractually required to allow the City access to the project location and the ability to obtain, publish, disseminate or distribute any and all information obtained from the project, without restriction and without payment or compensation by the City.

SECTION 4: APPLICATION PROCESS

- 4.1 Statement of Qualifications:** Statement of Qualification submissions must be received no later than February 8th, 2012, 12:00 p.m. Qualification submittals received after this deadline will not be considered for review. All qualifications must be prepared in the format set forth in **Appendix B**.
- 4.2 Submittal instructions:** Four (4) bound copies and one (1) complete electronic copy (via CD or flash drive) of the Request for Proposal must be mailed or hand-delivered (**fax submissions will not be accepted**) to the City of Decatur as follows:
- Purchasing Department
Attn: Education/Employment Training Program
City of Decatur
#1 Gary K. Anderson Plaza
Decatur, IL 62523
Telephone: 217/424-2797
- 4.3 Proposal evaluation:** Proposals will be competitively evaluated based on the criteria specified in **Appendix E**. The City's review committee will base its final determination on the qualifications and applications.
- 4.4 Notice of Award:** All applicants will be notified by mail as to the status of their proposal.
- 4.5 Disclaimers:** All RFPs submitted to the City are public documents and will become property of the City. The City retains all rights in the selection process and will decide, in its sole discretion, which applicants and services are best to support the goals identified for Education/Employment Training.

PROGRAM INFORMATION

PART A: GENERAL INFORMATION

Schedule

Release of Request for Proposal.....	December 12, 2011
RFP Due Date.....	February 8, 2012
Evaluation/Scoring.....	March 5, 2012
Proposal submitted to City Council.....	March-April, 2012
Program period	April 2012-April 2013

PART B: ELIGIBILITY CRITERIA

B.1 Targeted Populations

Project participants must include low moderate income City of Decatur residents. The program is encouraged to reach out to minorities and women, long-term unemployed (2-3 years), and individuals who are physically challenged.

B.2 Eligible Grant Area

The City is seeking RFPs from organizations located in the City of Decatur, Illinois. The project participants must reside within the incorporated area of the City of Decatur.

B.3 Program Eligible Activities

Eligible activities include:

- Program and/or contracted staff to coordinate project activities; such as educational instruction, career counseling, training, etc.
- Outreach, recruitment, and assessment (including motivational) activities
- Career awareness and exploration activities to ensure participants are appropriately matched to employment

PART C: PROPOSAL EVALUATIONS

C.1 Statement of Qualification Evaluation

In addition to meeting the eligibility criteria already described in the **Program Guidelines, Section 2.1**, the City shall consider the following criteria in evaluating Statement of Qualification submissions:

1. Participant Characteristics: Eligible entities can demonstrate success in recruiting and serving the low/moderate income or unskilled/untrained population. Entities must demonstrate the ability to handle fiduciary responsibilities.

2. Program Services, Capacity, and Cost: Eligible entities can provide one or more critical services to meet the program goals and have the staff qualifications and resources to provide high quality services.
3. Program Partnerships: Eligible entities have strong partnerships with educational institutions, technical academies, and/or employers.
4. Participant Results: Eligible entities have achieved results in recruiting participants (especially participants from targeted populations)

STATEMENT OF QUALIFICATIONS

**ALL QUALIFICATIONS MUST BE TYPEWRITTEN
NO HANDWRITTEN APPLICATIONS WILL BE ACCEPTED**

Statement of Qualifications must be submitted in the following format and content. The statements must be concise and show only relevant qualifications. Qualification statements will be evaluated on focused responsiveness. Page limits are specified for each component. Team resumes, Executive Reports of related projects, audit reports, and other materials may be submitted as Attachments.

Qualification submittals must contain the following three (3) components:

1. Submittal Letter: (1 page) Must be submitted on entity's official letterhead.

Submit a Letter of Interest in which your organization:

- Provides individual contact information (i.e., phone, fax, e-mail, etc.);
- Documents its status as an education/training community-based organization;
- Briefly describes its history in successfully accomplishing the scope of work outlined in the RFP, and;
- States its experience with and willingness to participate in partnership programs with other agencies, institutions, or businesses.

2. Qualifications: (8 page maximum)

Provide specific data from previous programs within the past two (2) years on the following:

- A. Participant Characteristics: Describe the demographic characteristics—at least race/ethnicity and gender—of the participants to be served by your program.
- B. Program Services, Capacity, and Cost: Describe the education, training, and support services provided by your program. Also, provide the names, titles, and experience of key staff that will work on this program and provide the services described. Resumes may be included in the attachments. Provide a brief overview of the program resources (e.g. equipment) that you have that can be used to deliver services. Eligible entities will be scored higher if they provide multiple services within their organization or through partnerships. Entities will also be scored higher if they have qualified staff and sufficient program resources to deliver the services listed. Finally, provide total cost-per-participant data for all program years in which you report participant outcome data. This should include all direct and indirect costs regardless of source of funding. Please provide information on what types of costs were included in your

total cost-per-participant calculation.

- C. Program Partnerships: Describe the partnerships you have established with employers, organizations, educators, and/or technical academies or other organizations that would enhance the process of providing employment opportunities. Entities will be scored higher based on the number and strength of existing partnerships. Submittals must provide Letters of Support/Memorandums of Understanding from all listed partners along with contact information. Letters of Support must use the template provided in **Appendix C**.
- D. Overall Participant Outcomes: Describe the success of your program by providing data on the following:
- i. Entry into Education/ Employment Training Programs: The number and percent of program participants who entered into a program.
 - ii. Retention and Progress in the Programs: The number and percent of program participants who were retained in the programs (remained a current member) and made progress toward certification, graduation, or journey-level status.
 - iii. Achievement of Certification, Graduation, Credentials and gainful Employment: The number and percent of program participants who achieved certification, graduation, journey-level credentials, and/or employment.

Demographic Data by Targeted Population: Please provide demographic data for all participants and include the targeted populations served (e.g., women, minorities, long-term unemployment of two years or more).

Applicants are encouraged to disaggregate participant outcome data for participants who are from one or more hard-to-serve groups.

3. Attachments (20 pages maximum)

- Staff Resumes
- Annual Organization Budgets/Financial reports
- Executive Reports of similar previous projects
- Board members mailing list and/or contact information
- By-laws
- Non-profit status documentation
- Other related materials

"LETTER OF SUPPORT" TEMPLATE

Letter of Support must be printed on organization's letterhead

Date

Neighborhood Outreach Division
 Attention: Education/Employment Training Program
 City of Decatur
 #1 Gary K. Anderson Plaza
 Decatur, IL 62523

Dear Director:

Please accept this letter as confirmation that our organization has worked for the past *(insert number)* years with (name of educational or community-based organization).

During this time, (name of educational or community-based organization) has:

- Formed a partnership with our organization that includes one of more of the following (please specify):
 1. Participation in Advisory groups
 2. Resource Sharing
 3. Other _____
- Provided us with (insert #) female, minority, or long term unemployed candidates that we have hired (if employer) or accepted into a certified program.
- Delivered the appropriate training and/or support services to prepare their candidates to be successful as demonstrated by the fact that (insert #) are current in the technical program or employer training.

I understand that I may be contacted by the City of Decatur, Neighborhood Outreach Division, to confirm the above information is complete and correct.

Sincerely,

Name
 Title
 (Area Code) Telephone Number

REQUEST FOR PROPOSAL (RFP)
COVER SHEET

**ALL QUALIFICATIONS MUST BE TYPEWRITTEN
NO HANDWRITTEN APPLICATIONS WILL BE ACCEPTED**

• QUALIFIED APPLICANT

<input type="checkbox"/> Community Based Organization		<input type="checkbox"/>			
Funding Request		Project Start Date		Project End Date	

• QUALIFIED APPLICANT

Organization's Name (as reported with the IRS):					
Street Address:					
City		State:	Illinois	Zip Code +4	
County					
Taxpayer Identification Number (TIN):					
DUNS Number (If Applicable):					

• CONTACT PERSON

Salutation:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Name:	
Title:		Email:	
Phone #:		Fax #:	

• AUTHORIZED SIGNATOR

Salutation:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Name:	
Title:		Email:	
Phone #:		Fax #:	

• QUALIFIED CO-APPLICANT

<input type="checkbox"/> Community Based Organization		<input type="checkbox"/> Educational institution	
Funding Request		Project Start Date	Project End Date

- **QUALIFIED CO-APPLICANT**

Organization's Name (as reported with the IRS):					
Street Address:					
City		State:	Illinois	Zip Code +4	
County					
Taxpayer Identification Number (TIN):					

- **CONTACT PERSON**

Salutation:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Name:	
Title:		Email:	
Phone #:		Fax #:	

- **AUTHORIZED SIGNATOR**

Salutation:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Name:	
Title:		Email:	
Phone #:		Fax #:	

- **PROJECT PARTNERS** (If applicable, please indicate all partners who will assist with project facilitation.)

Organization Name (as reported w/IRS):			
Salutation:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Contact:	
Title:		Email:	
Phone #:		Fax #:	
Address:			

City:		State:		ZipCode+4	
County:			Website:		

(Attach additional sheet(s) if necessary)

All qualified applicants must provide the following information:

- A completed IRS W-9 **Request for Taxpayer Identification Number & Certification**. This form can be e-mailed upon request or downloaded at www.irs.gov.

Non-governmental Entities MUST also provide the following information:

Indicate the year the organization was legally established: _____

- Submit a **current letter from the IRS verifying the organization is exempt from federal income tax** under section 501(c)(3) of the Internal Revenue Code, issued within the last three months, IRS Department of the Treasury, (877) 829-5500.

Attach documentation of **Good Standing Status**:

- Entities that are incorporated as a not-for-profit under the General Not For Profit Corporation Act of 1986 (805 ILCS 105/101.01 et seq.) are required to submit a **Certificate of Good Standing** from the Illinois Secretary of State's office, department of Business Services, (217) 782-7880 or (217) 782-6961 (TDD: (800) 252-2904).
- Entities that are organized as a Charitable/Not-For-Profit entity, which includes any person, individual, group of individuals, association, not-for-profit corporation, or other legal entity under the Charitable Trust Act (760 ILCS 55/1 et seq.) are required to submit a **Letter of Good Standing** from the Charitable Trust Bureau, office of the Illinois Attorney General, 100 W. Randolph Street, 11th Floor, Chicago, Illinois 60601; (312) 814-2595; TTY: (312) 814-3374.
- Entities that are neither of the above, but are exempt from paying sales/use tax under the Tax Act (35 ILCS 105/1 et seq.) are required to submit a copy of the **Tax Exemption Certificate** issued by the Illinois Department of Revenue, Central Registration, P.O. Box 19030, Springfield, Illinois 62794-9030; (217) 785-3707; TTD: (800) 544-5304.

DISCLOSURE OF PRIOR FUNDING:

In order to be eligible to receive grant funds, the applicant must be in compliance with the requirements of all grants previously received from the City of Decatur. List any other grants received within the past two (2) years (examples: CDBG, HOME, HPRP, DOJ, etc.) on the table below:

Grant #	Grant Program	Agency Contact	Award Amount	Duration

(Attach additional sheet(s) if necessary)

What other grant funding including, but not limited to, Federal, State, or local government (examples: City, Municipal, etc.) has the applicant been awarded in the past two years?

Agency	Program	Award Amount	Duration

(Attach additional sheet(s) if necessary)

REQUEST FOR PROPOSAL (RFP)

I. Partnership Plan and Proposal:

Applicant should provide a plan to establish collaboration or partnerships if not existing (i.e. representatives that provide advice on educational, training, and employment issues) and a proposal with a training provider, employer, and/or management-sponsored apprenticeship program.

These proposals should include written assurances from the program partners confirming they fully support the proposal and agree to the goals for how many people from targeted populations will enter the project's specified program(s) during the project period.

II. Scope of Work – Should include the following:

- A. Provide a **Project Plan** with clear and measurable goals and timetables for how many individuals from the targeted populations will progress in a timely fashion through each stage of the project from outreach, recruitment, and assessment; preparatory and training programs, and progress toward the identified achievement level status during the grant period.
- B. If applicable, **outline the process** through which short-term results may be achieved in increasing the number of individuals who will enter programs within the first six months of the project.
- C. If applicable, **outline the process** through which short-term results may be achieved.
- D. Provide an **overview of the barriers** facing targeted populations and include specific strategies to address these barriers at each stage of the project, including outreach and recruitment, preparation, entry, retention, and progress toward attainment of certification, graduation, or journey-level status.
- E. Place an "x" in the appropriate box detailing the program activities which will be performed by the applicants, by a subcontractor, or not part of plan:

Eligible Activity	Perform	Contract	N/A
Outreach, recruitment, and assessment (including motivational) activities			
Career awareness and exploration activities			
Technical training			
Education			
Eligible Activity			

	Perform	Contract	N/A

F. Provide the location(s) where eligible activities will be performed.

G. If applicable, attach a copy of all project curriculum and/or training materials.

III. Project Budget

Complete the **Line Item Budget Request** below. Please refer to the “**Budget Line Item Definitions**” that follow this table for help in completing this section. Do not change line items and/or substitute other categories:

Budget Line Items	Program Funding Request-CDBG	Non-CDBG Funds	Program Total
1. Personnel			
2. Contractual Services			
3. Recruitment/Outreach			
4. Training/Development			
5. Supplies/Materials			
6. Support Services			
7. Administration/Audit			
8.			
9.			
Total Budget:			

Budget Line Item Definitions:

1. **Personnel:** Includes salaries and fringe benefits for staff directly providing services to program participants
2. **Contractual Services:** Includes the costs for contractual services related to the primary purpose(s) of the project, e.g.
3. **Recruitment/Outreach:** Includes costs to solicit program participants.
4. **Training & Development:** Includes costs for training and developmental services for program participants.
5. **Supplies/Materials:** Includes expendable materials and items with a value of less than \$500.00, necessary to the successful performance and completion of the training project.
6. **Support Service:** Includes costs for services to provide case management for program participants.
7. **Administrative/Audit:** Includes costs associated with the administration and management of the grant, such as supervision, reporting, accounting, close-out, audits, and related indirect charges. This line item may not exceed 5 percent of the sum of the non-administrative portion of the grant (i.e., 5 percent of the sum of lines 1 through 6).

IV. Detailed Budget Narrative

Attach a detailed budget narrative for **all project costs**. The narrative should provide a detailed explanation by line item of how each cost figure was calculated and provide detailed information regarding the nature and reasonableness of proposed expenditures.

A. Personnel

Please provide the following information for **each individual or position** for which a salary subsidy is being requested.

- Individual's name and/or position title
- Individual's role in funded project
- Individual's total annual salary
- The proportion of time and will be dedicated to the funded project, and
- The amount of grant funds requested for the individual

In addition, please provide the fringe benefits (cost and percentage rate) for each individual. List fringe benefits or provide a copy of the fringe rate schedule or rate agreement. Fringes may include employer share of social security (FICA), retirement, group insurance, unemployment insurance and worker's compensation.

B. Contractual Services

Describe and list all costs for contractual services directly benefiting the program.

Facilities, Equipment rental, etc.

Include specific line items detailing the expenses of facility costs, equipment rental, and data processing costs. The type of services, square footage for space or number of hours and hourly rate for contract services should be described. Any other significant subcontracting (especially those over \$2,500) must be further identified and justified.

Proposed satellite office(s) should be identified as a contractual service. Include a separate detailed budget and summary for each satellite facility.

Contractual Staff

Identify expenditures for the procurement of professional and technical services related to the facilitation and monitoring of program participants. Please provide the name of the individual and/or company. Describe the services being provided, including the number of hours and rate of pay.

C. Recruitment and Outreach

Detail all costs for services that will be used to solicit program participants.

D. Training and Development

Detail all costs for training and developmental services. If an external vendor is used, detail all financial arrangements (e.g., contracts, tuition, or fee-for-service arrangements) that will result in a cost to the grant. Specify the nature of the service(s) being purchased, the basis for the cost to the program and the amount being requested for each vendor.

E. Supplies and Materials

Provide a list of items to be purchased. Separate the types of items such as general office, operational, computer supplies/materials, and training and instructional supplies/materials. Provide a description, a unit price, the number of items to be purchased, and total price for each item. Also explain how the item will be used. Requests to purchase items in excess of \$500.00 must be fully justified in the narrative.

Consumable items are supplies/materials, i.e., copy paper, pencils, paperclips, manuals, items used for training sessions, etc.

F. Support Services

Detail all costs for services, by line item, to provide case management for program participants.

G. Administrative/Auditing

Specify the administrative and audit costs that will account for the amount requested.

GENERAL CERTIFICATIONS

Please read the following before signing:

The Applicants:

- Understands that submission of an RFP for grant funding to the Neighborhood Outreach Division for training assistance is not a guarantee or commitment by the City for funding.
- Understands that it is the actual party in interest to this RFP and is not acting for, or on behalf of, an undisclosed party.
- Understands that it has no public or private interest, direct or indirect, and shall not acquire, directly or indirectly any such interest which does or may conflict in any manner with the performance of the applicant's services and obligations under this RFP.
- Understands that no member of any governing body or any officer, agent or employee of the City of Decatur is employed by the applicant or has a financial or economic interest directly in this RFP or any future compensation to be paid hereunder except as may be permitted applicable statute, regulation or ordinance.
- Understands that there is no action, suit or proceeding at law or in equity pending, nor to the best of applicant's knowledge, threatened against or affecting the applicant, before any court or before any governmental or administrative agency, which will have a material adverse effect on the performance contemplated by this RFP.
- Certifies that it is not currently operating under or subject to any Cease and Desist Order, or subject to any informal or formal regulatory action and, to the best of Grantee's knowledge, that it is not currently the subject of any investigation by any state or federal regulatory, law enforcement or legal authority. Should the applicant become the subject of an investigation by any state or federal regulatory, law enforcement or legal authority, applicant shall promptly notify the City of Decatur of any such investigation. Applicant acknowledges that should it later be subject to any Cease or Desist Order, Memorandum of Understanding, or found in violation pursuant to any regulatory action or any court action or proceeding before any administrative agency, that the City of Decatur is authorized to declare applicant in default and suspend or terminate the applicant's participation in RFP activities.
- Agrees to submit to the City of Decatur on a monthly basis, information regarding project activity as required for payment under the Education/Employment Training Grant.
- Authorizes the City of Decatur to verify in any manner deemed appropriate, any and all items indicated in this application, which includes information obtained through the Illinois Department of Employment Security, Consumer Credit Bureau Services and business reporting services such as Dun and Bradstreet.

- Agrees that, upon request by the City of Decatur, it will conduct an audit of grant funds in accordance with generally accepted auditing standards and any special audit conditions which the City of Decatur deems necessary to ensure the accountability of public funds.
- Acknowledges that if its RFP is Community Development Block Grant (CDBG)-funded, the applicant will be required to comply with the Illinois Drug Free Workplace Act, the Illinois Human Rights Act, the Americans with Disabilities Act and any future laws enacted which may be applicable to the grant.
- Certifies that all information contained in this RFP, including the documentation attached hereto, is accurate, complete and true to the best of the applicant's knowledge.
- Acknowledges that the individual identified below is the person authorized to execute a legal and binding agreement as the authorized signatory for a grant agreement if this RFP is awarded and funded by CDBG.

Date Signed: _____

Authorized Signatory:

Printed Name:	Signature:
----------------------	-------------------

Date Signed: _____

Authorized Signatory:

Printed Name:	Signature:
----------------------	-------------------

RFP SUBMISSION CHECKLIST

The following must be attached in the order detailed.

Incomplete submissions will not be reviewed.

- Four (4) bound paper copies and one (1) complete electronic copy (CD/flash drive) of RFP submission.**
- Completed Cover Sheet**
- Completed W-9 Request for Taxpayer Identification Number (TIN) and Certification; Dun & Bradstreet Number (DUNS)**
- If applicable, Recent Not-for-Profit Letter and Documentation of Good Standing Status.**
- Disclosure of Prior Funding**
- Partnership Plan and Proposal (MOU's)**
- Scope of Work**
- Project Budget**
- Detailed Budget Narrative**
- Signed Representations and Certifications**

DECATUR, ILLINOIS
FY 2011 Median Family Income (MFI)
adjusted according to family size

The following MFI's are based on statistical calculations made by HUD for the City of Decatur. The income presented at 30%, 50%, and 80% was published **May 31, 2011**.

	Family Size	1	2	3	4	5	6	7	8
Extremely Low	30%	12,500	14,250	16,050	17,800	19,250	20,650	22,100	23,500
Very Low	50%	20,800	23,800	26,750	29,700	32,100	34,500	36,850	39,250
Low	80%	33,250	38,000	42,750	47,500	51,300	55,100	58,900	62,700

***** MFI amounts based on Department of Housing and Urban Development information; subject to change**

**SCORING CRITERIA
FOR
CDBG FUNDING**

Applicant Name(s) _____
Applicant Name(s) _____
Applicant Name(s) _____

Funding Request \$ _____

STEP ONE: STATUTORY/REGULATORY REQUIREMENTS

- 1. Direct benefit to low income persons _____
- 2. New service offered OR supporting documentation of a quantifiable service increase _____
- 3. Non-profit agency: 501(c)(3) status or other IRS tax-exempt _____

STOP IF APPLICANT DOES NOT SATISFY ALL THREE ELEMENTS IN STEP 1

STEP TWO: LOCAL REQUIREMENTS - SITE ASSESSMENT

- 1. Site meets all applicable property maintenance codes: no code violations _____
- 2. Evidence of established program site _____
- 3. Handicap Accessible _____
- 4. Located near or access to public transportation _____
- 5. Multiple locations _____

STEP THREE: LOCAL REQUIREMENTS – ORGANIZATIONAL CAPACITY

- 1. Administrative/financial capacity _____
- 2. Independent audit or financial report _____
- 3. Other sources of funding (leveraging) _____

STEP FOUR: GOALS AND OUTCOMES

- 1. Provide programs that enhance literacy, education, and employment skills that are measurable _____

2. Provide a high level of assistance to low income individual _____
3. Provide MOU's with businesses or entities, neighborhood organizations, establishing partnerships that may include future employment opportunities for participants _____
4. Provides evidence of sustainability after federal funding agreement ends _____