REQUEST FOR PROPOSALS

Item Description: WIOA Skills Training- Workforce Solutions

Date to be opened: June 21, 2022

Issuing Department: Workforce Solutions of Providence/Cranston

QUESTIONS

- Please direct questions relative to the bidding process, how to fill out forms, and how to submit a bid (Pages 1-8) to Purchasing Agent Patti Jordan.
  - Phone: (401) 680-5264
  - Email: pjordan@providenceri.gov
    - Please use the subject line “RFP Question”
- Please direct questions relative to the Minority and Women’s Business Enterprise Program and the corresponding forms (Pages 9-13) to the MBE/WBE Outreach Director for the City of Providence, Grace Diaz
  - Phone: (401) 680-5766
  - Email: gdiaz@providenceri.gov
    - Please use subject line “MBE WBE Forms”
- Please direct questions relative to the specifications outlined (beginning on page 14) to the Executive Director of Workforce Solutions of Providence/Cranston for the City of Providence, Stephen Boyle
  - Phone: (401) 462-8902
  - Email: sboyle@providenceri.gov

INSTRUCTIONS FOR SUBMISSION

Bids may be submitted up to 2:15 P.M. on June 21, 2022 at the Department of the City Clerk, Room 311, City Hall, 25 Dorrance Street, Providence. At 2:15 P.M. all bids will be publicly opened and read at the Board of Contract Meeting in the City Council Chambers, on the 3rd floor of City Hall.

- Bidders must submit 2 copies of their bid in sealed envelopes or packages labeled with the captioned Item Description and the City Department to which the RFP and bid are related. (On page 1)
- Communications to the Board of Contract and Supply that are not competitive sealed bids (i.e. product information/samples) should have “NOT A BID” written on the envelope or wrapper.
- Only use form versions and templates included in this RFP. If you have an old version of a form do not recycle it for use in this bid.
  - The bid envelope and information relative to the bid must be addressed to:

  Board of Contract and Supply
  Department of the City Clerk – City Hall, Room 311
  25 Dorrance Street
  Providence, RI 02903
**PLEASE NOTE:** This bid may include details regarding information that you will need to provide (such as proof of licenses) to the issuing department before the formalization of an award.

*This information is NOT requested to be provided in your initial bid by design.*

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record. The City has made a conscious effort to avoid the posting of sensitive information on the City’s Open Meetings Portal, by requesting that such sensitive information be submitted to the issuing department only at their request.
BID PACKAGE CHECKLIST

Digital forms are available in the City of Providence Purchasing Department Office or online at http://www.providenceri.gov/purchasing/how-to-submit-a-bid/

The bid package MUST include the following, in this order:

- Bid Form 1: Bidder's Blank as the cover page/1st page (see page 6 of this document)
- Bid Form 2: Certification of Bidder as 2nd page (see page 7 of this document)
- Certificate Regarding Public Records (see page 8 of this document)
- Forms from the Minority and Women Business Enterprise Program: Based on Bidder Category. See forms and instructions enclosed (pages 9-13) or on: https://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/

*Please note: MBE/WBE forms must be completed for EVERY bid submitted and must be inclusive of ALL required signatures. Forms without all required signatures will be considered incomplete.

- Bidder’s Proposal/Packet: Formal response to the specifications outlined in this RFP, including pricing information and details related to the good(s) or service(s) being provided. Please be mindful of formatting responses as requested to ensure clarity.
- Financial Assurance, if requested (as indicated on page 5 of this document under “Bid Terms”)

All of the above listed documents are REQUIRED. (With the exception of financial assurances, which are only required if specified on page 5.)

***Failure to meet specified deadlines, follow specific submission instructions, or enclose all required documents with all applicable signatures will result in disqualification, or in an inability to appropriately evaluate bids.
NOTICE TO VENDORS

1. The Board of Contract and Supply will make the award to the lowest qualified and responsible bidder.
2. In determining the lowest responsible bidder, cash discounts based on preferable payment terms will not be considered.
3. Where prices are the same, the Board of Contract and Supply reserves the right to award to one bidder, or to split the award.
4. No proposal will be accepted if the bid is made in collusion with any other bidder.
5. Bids may be submitted on an “equal in quality” basis. The City reserves the right to decide equality. Bidders must indicate brand or the make being offered and submit detailed specifications if other than brand requested.
6. A bidder who is an out-of-state corporation shall qualify or register to transact business in this State, in accordance with the Rhode Island Business Corporation Act, RIGL Sec. 7-1.2-1401, et seq.
7. The Board of Contract and Supply reserves the right to reject any and all bids.
8. Competing bids may be viewed in person at the Department of the City Clerk, City Hall, Providence, immediately upon the conclusion of the formal Board of Contract and Supply meeting during which the bids were unsealed/opened. Bids may also be accessed electronically on the internet via the City’s Open Meetings Portal.
9. As the City of Providence is exempt from the payment of Federal Excise Taxes and Rhode Island Sales Tax, prices quoted are not to include these taxes.
10. In case of error in the extension of prices quoted, the unit price will govern.
11. The contractor will NOT be permitted to: a) assign or underlet the contract, or b) assign either legally or equitably any monies or any claim thereto without the previous written consent of the City Purchasing Director.
12. Delivery dates must be shown in the bid. If no delivery date is specified, it will be assumed that an immediate delivery from stock will be made.
13. A certificate of insurance will normally be required of a successful vendor.
14. For many contracts involving construction, alteration and/or repair work, State law provisions concerning payment of prevailing wage rates apply (RIGL Sec. 37-13-1 et seq.).
15. No goods should be delivered or work started without a Purchase Order.
16. Submit 2 copies of the bid to the City Clerk, unless the specification section of this document indicates otherwise.
17. Bidder must certify that it does not unlawfully discriminate on the basis of race, color, national origin, gender, gender identity or expression, sexual orientation and/or religion in its business and hiring practices and that all of its employees are lawfully employed under all applicable federal, state and local laws, rules and regulations. (See Bid Form 2.)
1. Financial assurances may be required in order to be a successful bidder for Commodity or Construction and Service contracts. If either of the first two checkboxes below is checked, the specified assurance must accompany a bid, or the bid will not be considered by the Board of Contract and Supply. The third checkbox indicates the lowest responsible bidder will be contacted and required to post a bond to be awarded the contract.

a) A certified check for $_____ must be deposited with the City Clerk as a guarantee that the Contract will be signed and delivered by the bidder.

b) A bid bond in the amount of _____ per centum (%) of the proposed total price, must be deposited with the City Clerk as a guarantee that the contract will be signed and delivered by the bidder; and the amount of such bid bond shall be retained for the use of the City as liquidated damages in case of default.

c) A performance and payment bond with a satisfactory surety company will be posted by the bidder in a sum equal to one hundred per centum (100%) of the awarded contract.

d) No financial assurance is necessary for this item.

2. Awards will be made within sixty (60) days of bid opening. All bid prices will be considered firm, unless qualified otherwise. Requests for price increases will not be honored.

3. Failure to deliver within the time quoted or failure to meet specifications may result in default in accordance with the general specifications. It is agreed that deliveries and/or completion are subject to strikes, lockouts, accidents and Acts of God.

The following entry applies only for COMMODITY BID TERMS:

4. Payment for partial delivery will not be allowed except when provided for in blanket or term contracts.

The following entries apply only for CONSTRUCTION AND SERVICE BID TERMS:

5. Only one shipping charge will be applied in the event of partial deliveries for blanket or term contracts.

6. Prior to commencing performance under the contract, the successful bidder shall attest to compliance with the provisions of the Rhode Island Worker’s Compensation Act, RIGL 28-29-1, et seq. If exempt from compliance, the successful bidder shall submit a sworn Affidavit by a corporate officer to that effect, which shall accompany the signed contract.

7. Prior to commencing performance under the contract, the successful bidder shall, submit a certificate of insurance, in a form and in an amount satisfactory to the City.
BID FORM 1: Bidders Blank

1. Bids must meet the attached specifications. Any exceptions or modifications must be noted and fully explained.

2. Bidder’s responses must be in ink or typewritten, and all blanks on the bid form should be completed.

3. The price or prices proposed should be stated both in WRITING and in FIGURES, and any proposal not so stated may be rejected. Contracts exceeding twelve months must specify annual costs for each year.

4. Bids SHOULD BE TOTALED so that the final cost is clearly stated (unless submitting a unit price bid), however each item should be priced individually. Do not group items. Awards may be made on the basis of total bid or by individual items.

5. All bids MUST BE SIGNED IN INK.

Name of Bidder (Firm or Individual): ____________________________________________________________

Contact Name: _____________________________________________________________________________

Business Address: __________________________________________________________________________

Business Phone #: ___________________________________________________________________________

Agrees to bid on (Items(s) to be bid): _______________________________________________________________________

If the bidder’s company is based in a state other than Rhode Island, list name and contact information for a local agent for service of process that is located within Rhode Island ______________________________________________________

Please visit http://www.naics.com/search/ and identify the NAICS Code(s) for items being bid on. Enter the NAICS code(s) here or in parentheses next to each item listed immediately above: ______________________________________________________

Delivery Date (if applicable): _________________________________________________________________

Name of Surety Company (if applicable): __________________________________________________________

Use additional pages if necessary for additional bidding details.

___________________________________________________________________________________________

Signature of Representation

___________________________________________________________________________________________

Title
BID FORM 2: Certification of Bidder  
(Non-Discrimination/Hiring)

Upon behalf of_____________________________________________ (Firm or Individual Bidding),

I,_______________________________________________________(Name of Person Making Certification),

being its_________________________________________________ (Title or “Self”), hereby certify that:

1.    Bidder does not unlawfully discriminate on the basis of race, color, national origin, gender, sexual orientation and/or religion in its business and hiring practices.

2.    All of Bidder’s employees have been hired in compliance with all applicable federal, state and local laws, rules and regulations.

I affirm by signing below that I am duly authorized on behalf of Bidder, on this__ day of______________ 20____.

________________________________________________
Signature of Representation

________________________________________________
Printed Name
Certificate Regarding Public Records

Upon behalf of______________________________________________ (Firm or Individual Bidding),
I,                          (Name of Person Making Certification),
being its            (Title or“ Self”), hereby certify an understanding that:

1. All bids submitted in response to Requests for Proposals (RFP’s) and Requests for Qualification
   (RFQ’s), documents contained within, and the details outlined on those documents become public
   record upon receipt by the City Clerk’s office and opening at the corresponding Board of Contract
   and Supply (BOCS) meeting.
2. The Purchasing Department and the issuing department for this RFP/RFQ have made a conscious
   effort to request that sensitive/personal information be submitted directly to the issuing
   department and only at request if verification of specific details is critical the evaluation of a
   vendor’s bid.
3. The requested supplemental information may be crucial to evaluating bids. Failure to provide
   such details may result in disqualification, or an inability to appropriately evaluate bids.
4. If sensitive information that has not been requested is enclosed or if a bidder opts to enclose the
   defined supplemental information prior to the issuing department’s request in the bidding packet
   submitted to the City Clerk, the City of Providence has no obligation to redact those details and
   bears no liability associated with the information becoming public record.
5. The City of Providence observes a public and transparent bidding process. Information required in
   the bidding packet may not be submitted directly to the issuing department at the discretion of the
   bidder in order to protect other information, such as pricing terms, from becoming public. Bidders
   who make such an attempt will be disqualified.

I affirm by signing below that I am duly authorized on behalf of Bidder, on
this_________________day of___________________20____.

_________________________________________________
Signature of Representation

________________________________________________
Printed Name
**WBE/MBE Form Instructions**

The City of Providence actively seeks Minority and Women business enterprises to participate in bids to meet the City’s procurement needs. Pursuant to the City of Providence Code of Ordinances, Chapter 21, Article II, Sec. 21-52 (Minority and Women’s Business Enterprise) and Rhode Island General Laws (as amended), Chapter 31-14, et seq. (Minority Business Enterprise), Minority Business Enterprise (MBE) and Women’s Business Enterprise (WBE) participation goals apply to contracts.

The goal for Minority Business Enterprise (MBE) participation is **10%** of the total bid value.

The goal for Women’s Business Enterprise (WBE) participation is **10%** of the total bid value.

The goal for combined MBE/WBE participation is **20%** of the total bid value.

Only businesses certified with the State of Rhode Island as minority and/or women business enterprises are counted towards the City’s goals. Eligible minority or women-owned businesses are encouraged to seek certification from the State of Rhode Island Minority Business Enterprise Compliance Office at: http://odeo.ri.gov/offices/mbeco/

**Note**: MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence's MBE program.

**Bid Requirements:**

**All Bidders**: All bidders must complete and submit the **MBE/WBE Participation Affidavit** indicating whether or not they are a state-certified MBE/WBE and acknowledging the City's participation goals. Submission of this form is required with every bid. Your bid will not be accepted without an affidavit.

**Bidders who will be subcontracting**: Bidders who will be subcontracting must submit the **Subcontractor Disclosure Form** as part of their bid submission. All subcontractors, regardless of MBE/WBE status, must be listed on this form. Business NAICS codes can be found at [https://www.naics.com/search/](https://www.naics.com/search/). Awarded bidders are required to submit **Subcontractor Utilization and Payment Reports** with each invoice.

**Waiver Requests:**

If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F on the Subcontractor Disclosure Form) and the prime contractor is not a Rhode Island State-certified MBE or WBE, the Bidder must complete the **MBE/WBE Waiver Request Form** for review. Waivers will be considered on a case by case basis.

No waiver will be granted unless the waiver request includes documentation that demonstrates that the Bidder has made good faith efforts to achieve the City’s stated participation goals. Waivers must be reviewed and signed by the City of Providence’s MBE/WBE Outreach Director, Grace Diaz, or her designee. Department Directors cannot recommend a bidder for award if this form is applicable and absent. If the bid does not meet the participation goals of the City of Providence and a waiver is not filed with the signature of the MBE/WBE Outreach Director or her designee, the bid will not be accepted.

**Verifying MBE/WBE Certification**

It is the responsibility of the bidder to confirm that every MBE/WBE named in a proposal and included in a contract is certified by the Rhode Island Minority Business Enterprise Compliance office. The current MBE/WBE directory is available at the State of RI MBE Office, One Capitol Hill, 2nd Floor, Providence, RI, or online at [http://odeo.ri.gov/offices/mbeco/mbe-wbe.php](http://odeo.ri.gov/offices/mbeco/mbe-wbe.php). You can also call (401) 574-8670 to verify certification, expiration dates, and services that the MBE/WBE is certified to provide. Note: MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence's MBE program.

**Form Instructions:**

Access all bid forms from [http://www.providenceri.gov/oeo/](http://www.providenceri.gov/oeo/) or [http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/](http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/). **Download** the forms as blank PDFs. Once saved on your computer, fill them out using the Adobe program. The fillable PDFs must be completed in Adobe in order to be saved properly. Google Chrome and similar platforms do not allow for the forms to be saved as filled PDFs. Therefore, please download the blank forms to your computer, then fill them out and save.

**Assistance with Form Requirements**

**Contract Requirements:**

Prime contractors engaging subcontractors must submit the *Subcontractor Utilization and Payment Report* to the City Department’s Fiscal Agent with every invoice and with request for final payment. This form is not submitted as a part of the initial bid package.

For contracts with duration of less than 3 months, this form must be submitted along with the contractor's request for final payment. The form must include all subcontractors utilized on the contract, both MBE/WBE and non- MBE/WBE, the total amount paid to each subcontractor for the given period and to date. During the term of the contract, any unjustified failure to comply with the MBE/WBE participation requirements is a material breach of contract.

**Questions?**

For more information or for assistance with MBE/WBE Forms, contact the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.com or (401) 680-5766.
MBE/WBE PARTICIPATION AFFIDAVIT

Item Discussion (as seen on RFP):

Prime Bidder: _____________________________________________
Prime Bidder (Company) Phone Number: ________________________
Prime Bidder (Company) Zip Code: ___________

Which one of the following describes your business’ status in terms of Minority and/or Woman-Owned Business Enterprise certification with the State of Rhode Island?  _____MBE  _____WBE  _____Neither MBE nor WBE

I acknowledge the City of Providence’s goals of supporting MBE/WBE certified businesses. Initial ___________

If awarded the contract, I understand that my company must submit to the Minority and Women’s Business Coordinator at the City of Providence (MBE/WBE Office), copies of all executed agreements with the subcontractor(s) being utilized to achieve the participation goals and other requirements of the RI General Laws. **I understand that these documents must be submitted prior to the issuance of a notice to proceed.** Initial ___________

I understand that, if awarded the contract, my firm must submit to the MBE/WBE Office canceled checks and reports required by the MBE/WBE Office on a quarterly basis verifying payments to the subcontractors(s) utilized on the contract. Initial ___________

I understand that, if awarded this contract, I must substitute another certified MBE and WBE firm(s) to meet the participation goals. **I understand that I may not make a substitution until I have obtained the written approval of the MBE/WBE Office.** Initial ___________

I do solemnly declare and affirm under the penalty of perjury that the contents of the foregoing Affidavit are true and correct to the best of my knowledge, information and belief.

________________________________________  ______________________________________
Signature of Bidder     Printed Name

SUBCONTRACTOR DISCLOSURE FORM

Fill out this form only if you WILL SUBCONTRACT with other parties. If you will not subcontract any portion of the proposed bid, do not fill out this form.

Prime Bidder: _____________________________________________
Primary NAICS Code: ________________________________________

Item Description (as seen on RFP): ________________________________
Please list all Subcontractors below. Include the total dollar value that you propose to share with each subcontractor and the dollar amount to be subcontracted. Please check off MBE and WBE where applicable. The directory of all state-certified MBE/WBE firms is located at www.mbe.ri.gov. Business NAICS codes can be found at https://www.naics.com/search/.

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<th>Proposed Subcontractor</th>
<th>MBE</th>
<th>WBE</th>
<th>Primary NAIC</th>
<th>Date of Mobilization</th>
<th>$ Value of Subcontract</th>
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- A. MBE SUBCONTRACTED AMOUNT: $  

- B. WBE SUBCONTRACTED AMOUNT: $  

- C. NON MBE WBE SUBCONTRACTED AMOUNT: $  

- D. DOLLAR AMOUNT OF WORK DONE BY THE PRIME CONTRACTOR: $  

- E. TOTAL AMOUNT OF BID (SUM OF A, B, C, & D): $  

- F. PERCENTAGE OF BID SUBCONTRACTED TO MBEs AND WBEs. (Divide A by F and multiply result by 100)

Please read and initial the following statement acknowledging you understand. If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F) and the prime contractor is NOT a Rhode Island State-certified MBE or WBE, you must fill out the MBE/WBE WAIVER REQUEST FORM for consideration by City of Providence MBE/WBE Outreach Director. Initial ______

Signature of Bidder ________________________________ Printed Name ________________________________

**MBE/WBE Waiver Request Form**

Fill out this form only if you are subcontracting and did not meet the 20% MBE/WBE participation goal. State-certified MBE or WBE Prime Bidders are NOT REQUIRED to fill out this form.

Submit this form to the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.gov, for review prior to bid submission. This waiver applies only to the current bid which you are submitting to the City of Providence and does not apply to other bids your company may submit in the future.

Prime Bidder: ________________________________  
Company Trade: ________________________________  
Item Discussion (as seen on RFP):

___________________________________________________________________________

To receive a waiver, you must list the certified MBE and/or WBE companies you contacted, the name of the primary individual with whom you interacted, and the reason the MBE/WBE company could not participate on this project.
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<tr>
<th>MBE/WBE Company Name</th>
<th>Individual’s Name</th>
<th>Company Trade</th>
<th>Why did you choose not to work with this company?</th>
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I acknowledge the City of Providence’s goal of a combined MBE/WBE participation is 20% of the total bid value. I am requesting a waiver of ______ % MBE/WBE (20% minus the value of Box F on the Subcontractor Disclosure Form). If an opportunity is identified to subcontract any task associated with the fulfillment of this contract, a good faith effort will be made to select MBE/WBE certified businesses as partners.

_________________________  _________________________________  ____________________
Signature of Prime Contractor    Printed Name    Date Signed

_________________________  _________________________________  ____________________
Signature of City of Providence                   Printed Name of City of Providence   Date Signed
MBE/WBE Outreach Director                        MBE/WBE Outreach Director
PROVIDENCE/CRANSTON
WORKFORCE DEVELOPMENT BOARD

REQUEST FOR PROPOSALS (RFP)

FOR

WIOA SKILLS TRAINING-WORKFORCE SOLUTIONS

FOR THE

PROVIDENCE/CRANSTON
WORKFORCE DEVELOPMENT AREA

ISSUE DATE: May 26, 2022
RESPONSE DATE: June 21, 2022
SECTION I: INTRODUCTION

Workforce Solutions of Providence/Cranston (WSPC) is issuing this Request for Proposals (RFP) to solicit the training of cohorts of multiple individuals to meet the needs of employers and provide job seekers access to high-wage, high-demand jobs. We are seeking innovative proposals that connect unemployed workers to employment opportunities through new, unique, and efficient strategies.

The Workforce Innovation and Opportunity Act (WIOA) allows local Workforce Investment Development (WDB) to offer occupational skills training to eligible and qualified WIOA customers through modular component training to provide job seekers access to high-quality training on a career pathway and an industry-recognized credential.

PART A: ELIGIBLE APPLICANTS

The following entities are considered eligible applicants and may respond to this RFP:

- An institution of higher education;
- An employment service State agency;
- A community-based organization, non-profit organization, or intermediary;
- A private-for-profit entity;
- A government agency;
- A non-traditional public secondary school;
- An area career and technical education school; and/or,
- Other interested entities not prohibited by law.

No entity may compete for funds if: (1) the entity has been debarred or suspended or otherwise determined to be ineligible to receive Federal or State funds by an action of any governmental agency; (2) the entity’s previous contract(s) with the PCWDB have been terminated for cause; or (3) the entity has not complied with an official order to repay disallowed costs incurred during its conduct of programs or services.
PART B: CHARACTERISTICS OF PROPOSALS

The characteristics identified below are designed to reflect elements that contribute to training programs targeted to unemployed adults and youth (age 18 and older) with barriers to employment. A particular emphasis of the RFP is to solicit proposals that offer training opportunities in those industry sectors that have been identified by the PCWDB as those with high-demand occupations. Those industry sectors are:

- Information Technology
- Transportation and Logistics
- Manufacturing
- Health Care

Workforce Solutions of Providence/Cranston is soliciting proposals to support training programs targeted to unemployed adults and youth (age 18 and older) with barriers to employment. The expected outcome is post-training employment in a trading-related job.

For purposes of this RFP, **individuals with barriers to employment** include those in one or more of the following categories:

(A) Displaced homemakers.
(B) Low-income individuals.
(C) Indians, Alaska Natives, and Native Hawaiians.
(D) Individuals with disabilities
(E) Older individuals.
(F) Ex-offenders.
(G) Homeless individuals
(H) Youth who are in or have aged out of the foster care system.
(I) Individuals who are English language learners, individuals who have low levels of literacy, and individuals facing substantial cultural barriers.
(J) Eligible migrant and seasonal farmworkers.
(K) Individuals within 2 years of exhausting lifetime eligibility under part A of title IV of the Social Security Act.
(L) Single parents (including single pregnant women).
(M) Long-term unemployed individuals.
PART C: CONTRACT TERM

The period of performance for contracts awarded under this solicitation may be as early as June 30, 2022 to June 30, 2023 provided performance remains acceptable during that period. Proposed costs will be analyzed and a contract will be negotiated on a fixed-unit price per individual. There will be no contract negotiated with a straight 100% cost-reimbursement payment structure.

The Providence/Cranston Workforce Development Board reserves the right to vary or change the terms of any contract executed as a result of this RFP, including funding levels, the scope of work, performance standards, referral sources and shortening or extending the contract period, as it deems necessary in the interest of the Providence/Cranston Workforce Development Board and its programs, pending availability of funds.

PART D SERVICES REQUIRED

The successful bidders will work collaboratively with Workforce Solutions of Providence/Cranston to recruit and assess potential program participants. Potential program participants will be required to be enrolled into either the WIOA Adult, Youth or Dislocated Worker program. Recruitment, orientation, assessment, and enrollment will be done collaboratively with Workforce Solutions staff.
SECTION II: PROPOSAL RESPONSE FORMAT

The proposer must use the format contained in this section that consists of four parts:

Part A: Identifying Information,
Part B: Training Program Narrative Response,
Part C: Organizational Capacity and Experience,
Part D: Budget and Budget Narrative.

PART A: IDENTIFYING INFORMATION

1. Legal Name of Respondent: ________________________________________________

2. Authorized Contact Person/Title:  ____________________________________________

3. Address: ________________________________________________________________
   ________________________________________________________________

4. Telephone: _________________ Email:      __________________________________

5. Website: ____________________________________________________________

6. Organization Structure:
   r Institution of Higher Education
   r Employment Service Agency
   r Community-Based, Non-Profit or Intermediary Organization
   r Private-for-Profit Entity
   r Government Agency
   r Non-Traditional Public Secondary School
   r Area Career and Technical Education School
   r Other:    _________________________________________________________

By my signature, I am empowered and can act on behalf of the proposing organization in submitting this response. I certify that the information contained herein is true and correct to the best of my knowledge.

_______________________  ____________________  ____________________  ____________
PART B: TRAINING PROGRAM NARRATIVE RESPONSE

Please note, clear, thorough, concise answers are preferred rather than overly verbose narrative that does not provide a specific response. Get to the point as quickly and completely as possible. Do not repeat statements or ideas within the text of the proposal. Referring the reviewer to another section of the proposal for other information is preferred rather than repeating the information.

1. Statement of Need

Please provide an overview of the occupations the skill training you are proposing seeks to address. In your response please include information regarding: Local job opportunities in the training sector; wage earning potential in the training sector; demonstrated placement and retention experience in employment opportunities in the training sector; and letters of support from employer groups.

2. Description of Training/Curriculum

Utilizing the following format, provide an outline of the training curriculum including the list of specific skill sets to be taught in each curriculum component and the length of time for each component. Also, identify nationally and industry recognized and other credentials that will result from this training. (Applicant may attach a copy of its curriculum in lieu of using this format.)

<table>
<thead>
<tr>
<th>Training/Curriculum Component</th>
<th>Skill Sets Taught</th>
<th>Training Duration</th>
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</thead>
<tbody>
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</table>

Total Training Duration
Enrollment Schedule:

Number of proposed training cycles: __________________
Total number of participants in each cycle: __________________
Total number of participants: __________________

Projected enrollment plan:

<table>
<thead>
<tr>
<th>CYCLE NO.</th>
<th>START DATE</th>
<th>NO. TO BE ENROLLED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example:  Cycle 1</td>
<td>Date</td>
<td>10</td>
</tr>
<tr>
<td>Cycle 2</td>
<td>Date</td>
<td>10</td>
</tr>
</tbody>
</table>

Location of Training: *(Include the specific location of the training facility.)*

____________________________________________________________________
____________________________________________________________________

Projected Starting Wage Upon Entrance into Employment: _____________
(Provide backup data for projected wage)
3. **Recruitment and Assessment**

The applicant will work collaboratively with Workforce Solutions of Providence/Cranston for recruiting and assessing participants who are suitable for this training opportunity. Potential training participants must be enrolled into either the WIOA Adult, Youth or Dislocated Worker program. Describe the process you will use to refer all potential participants to WSPC for WIOA enrollment. Please describe strategies for outreach, recruitment and enrollment of job seekers to your training program. Include a description of any tools, tests, or methods used to determine the following: levels of basic skills, work readiness skills, interests and aptitude for your specific industry training, occupational skills and supportive service needs.

4. **Placement and Outcomes**

Identify the job placement strategy to be used to ensure individuals with barriers obtain employment. In addition, provide projections for the following expected outcomes:

- Total participants enrolled in education or training:
- Total participants completing education or training:
- Total participants that receive an industry recognized credential:
- Total participants placed into paid internships/work experience:
- Total participants placed into unsubsidized employment:
- Average wage:

**Part C: Organizational Capacity and Experience**

1. **Description of Applicant’s Organization**

Provide a concise description of your organization including the legal status of the organization, the governance structure and mission, vision and goals along with the major training programs currently offered. Explain how your mission aligns with this funding opportunity and your capacity to effectively manage the programmatic, fiscal and administrative aspects of this project.

2. **Unique Attributes of Applicant**

Provide a brief description of why your organization is in the best position to deliver an innovative skills training vendor. Include any unique or innovative projects and programs of your organization, experience, or approach that may set your organization and/or your response apart from others.

3. **Experience with Special Populations**

Describe your experience in working with special populations identified on page 16. Please discuss how you measure the effectiveness of your programming to special populations.

4. **Past Experience with State or Federally-Funded Programs**

Describe your experience working with Federally-funded programs delivering workforce development services to job seekers and employers. Include performance for those programs.
Part D: Budget and Budget Narrative

Please provide a budget for the period July 1, 2022 to June 30, 2023. Please note: The purchase, lease or rental of equipment, as well as supplies, is not an allowable budget item as these costs will be part of the overall infrastructure costs absorbed by PCWBD. Provide a narrative to support the budget.

A. Salaries

<table>
<thead>
<tr>
<th>STAFF POSITION</th>
<th>STAFF RESPONSIBILITIES</th>
<th>ANNUAL SALARY</th>
<th>% CHARGED TO PROGRAM</th>
<th>AMOUNT REQUESTED FOR</th>
</tr>
</thead>
<tbody>
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</table>

TOTAL:

B. Fringe Benefits

<table>
<thead>
<tr>
<th>FRINGE BENEFIT</th>
<th>WAGE BASE</th>
<th>RATE</th>
<th>AMOUNT REQUESTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>FICA</td>
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<td></td>
<td></td>
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<tr>
<td>HEALTH</td>
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</tbody>
</table>

TOTAL:

C. Travel

<table>
<thead>
<tr>
<th>STAFF POSITION</th>
<th>RATE PER MILE</th>
<th>NUMBER OF MILES</th>
<th>NUMBER OF WEEKS</th>
<th>AMOUNT REQUESTED</th>
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TOTAL:
D. Other Costs

<table>
<thead>
<tr>
<th>DESCRIPTION OF OTHER COSTS INCLUDING PROFIT IF APPLICABLE</th>
<th>AMOUNT</th>
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<tr>
<td><strong>TOTAL:</strong></td>
<td></td>
</tr>
</tbody>
</table>

Total Budget Amount Requested: _____________

SECTION VI: SELECTION CRITERIA

All proposals will undergo an initial review to ensure that it is submitted in the proper format and that the applicant is eligible to bid in accordance with the criteria described in Section II, Part A of this RFP that identifies eligible applicants. In addition to the initial review, all proposals will undergo a technical review of the proposal narrative; the proposer’s organizational capacity and experience; as well as budget and budget narrative.

With respect to the technical review, proposals that do not meet a minimum threshold score of 60 will not be considered. Proposals that meet the minimum threshold will have the cost proposal evaluated for reasonableness of cost.

SECTION VII: EVALUATION CRITERIA TO BE UTILIZED IN THE TECHNICAL REVIEW

**PART A: Training Program Narrative (50 points)**

1. **Statement of Need (15 points)**

   Has the applicant provided an overview of the occupations the skill training they are proposing seeks to address? Has the applicant included information regarding: Local job opportunities in the training sector; wage earning potential in the training sector; demonstrated placement and retention experience in employment opportunities in the training sector; and letters of support from employer groups.
2. **Description of Training/Curriculum (10 points)**

Has the applicant included the list of specific skill sets to be taught in each curriculum component and length of time for each component? Has the applicant identified nationally and industry recognized credentials that will result from this training?

3. **Recruitment and Assessment (15 points)**

Has the applicant described a detailed plan for working collaboratively with Workforce Solutions of Providence/Cranston for recruiting and assessing suitable participants? Has the applicant described strategies for outreach, recruitment and enrollment of job seekers to their training program? Has the applicant included a description of tools, tests, or methods used to determine: levels of basic skills, work readiness skills, interests and aptitude for their specific industry training, occupational skills and supportive service needs?

4. **Placement and Outcomes (10 points)**

Has the applicant identified the job placement strategy to be used to ensure individuals with barriers obtain employment? Has the applicant provided projections for the expected outcomes?

- Total participants enrolled in education or training:
- Total participants completing education or training:
- Total participants that receive an industry recognized credential:
- Total participants placed into paid internships/work experience:
- Total participants placed into unsubsidized employment:
- Average wage:
- Labor demand for occupation:

**Part B: Organizational Capacity and Experience (40 points)**

1. **Description of Applicant’s Organization (10 points)**

Has the applicant provided a concise description of its organization to include its legal status, governance structure, programs, mission and vision? Has it explained how its mission aligns with the responsibilities as defined in the RFP?

2. **Unique Attributes of Applicant (5 points)**

Has the applicant fully explained why it is in the best position to deliver an innovative One-Stop Delivery System? Has it described why its application and organization is unique and/or innovative from other proposers?
3. **Experience with Special Populations (15 points)**
   Has the applicant described its experience in working with individuals with barriers to employment as described on page 16? Has the applicant detailed this experience as it relates to program completion rates, credentials earned, employment placement rates and retention rates?

4. **Past Experience with State and Federally-Funded Programs (10 points)**
   Has the applicant described any experience in working with State and Federally-funded programs? Has the applicant demonstrated the capacity to meet performance?

**Part D: Budget and Budget Narrative (10 points)**

**SECTION IV: RESPONSIVE PROPOSALS**

To be considered responsive, proposals must meet the following minimum criteria:

One (1) original proposal (clearly marked as “Original Copy”) and two (2) copies must be received by the City of Providence Board of Contract and Supply by no later than 2:15 pm on June 21, 2022. Copies submitted electronically will not be considered. All responses must be delivered to:

Board of Contract and Supply
ATTN: City Clerk Office
Providence City Hall
25 Dorrance Street
Providence, RI 02903

The timely delivery of a proposal is entirely the responsibility of the respondent. Proposals postmarked on or before the proposal due date but delivered after the due date or time will be considered non-responsive. Proposals hand delivered after the due date or time will be considered non-responsive. Proposals that do not follow submittal guidelines will be considered non-responsive.

1. Please note that each section of the Proposal Format must begin on a new page and be clearly identifiable using the same headings;

2. Proposal “Part B Program Narrative Response” and “Part C Organizational Capacity and Experience” is limited to twenty-five (25) pages. The Budget, Executive Summary, and Addendum are not counted in
the 25-page limit. All proposals must be single-sided on 8.5” x 11” paper with 1” inch margins using a 12-point font in a 1.5 -spaced format;

3. Each page must be sequentially numbered at the bottom of each page;

4. The proposal response must be manually signed by an official authorized to represent and bind the proposing agency;

5. Proposals must be presented in the same order as set forth in this Request for Proposal and,

6. Proposers are not to submit any additional attachments or exhibits. The proposal response is limited to the Proposal Response Format described.

7. The Providence/Cranston Workforce Development Board reserves the right to reject any or all proposals.

8. Applicants are reminded that a separate proposal must be submitted for each occupational skill area for which training is proposed.

9. Applicants will be responsible for submitting all forms required for federal reporting.

SECTION V: REQUEST FOR PROPOSAL TIMELINE

The timeline for this RFP is as follows:

<table>
<thead>
<tr>
<th>DATE</th>
<th>ACTIVITY</th>
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<tbody>
<tr>
<td>May 26, 2022</td>
<td>RFP is issued by the Providence Board of Contract and Supply</td>
</tr>
<tr>
<td></td>
<td>Final date for submitting questions regarding the RFP</td>
</tr>
<tr>
<td>June 21, 2022</td>
<td>Proposals Due at the City of Providence Board of Contract and Supply no later than 2 p.m.</td>
</tr>
<tr>
<td>July 6, 2022</td>
<td>Contract Awarded</td>
</tr>
</tbody>
</table>
Section VII: INQUIRIES

All inquiries regarding this RFP may be made to Stephen Boyle at the email address: sboyle@providenceri.gov until June 14, 2022, after which no questions will be entertained. All responses to questions received by June 14, 2022 will be answered in an addendum issued by the Board of Contract and Supply to the email address furnished by the applicant and posted on the Workforce Solutions page the City of Providence web site www.providenceri.gov.

Section VIII: ADMINISTRATIVE AND TECHNICAL REQUIREMENTS

All contractors must meet a minimum level of administrative capacity in order to contract with the Providence/Cranston Workforce Development Board. The following administrative / technical elements will apply. In this document “The Board” refers to the Providence/Cranston Workforce Board issuing this RFP.

A. Audit / Financial Statements

The respondent if selected, during the contract negotiation period must submit a most recent audit in accordance with the following requirements applicable to the organization:

1. *A Non-Profit entity with federal expenditures of $750,000 or more:* a single complete copy of the most recent required A-133 audit report with Management Letter, findings, and corrective action, if any.

2. *Non-Profit entity with federal expenditures of less than $750,000:* a single complete copy of the most recent audited financial statements and current written accounting procedures.

3. *Commercial For-Profit entity and a sub-recipient with federal expenditures of $750,000 or more:* a single complete copy of either an organization-wide audit conducted in accordance with A-133 or a program-specific financial and compliance audit.

4. *Commercial For-Profit entity with federal expenditures of less than $750,000:* a single complete copy of the most recent audited/prepared financial statements that comply with GAAP (Generally Accepted Accounting Principles) and such audit or financial statements identifying no outstanding unresolved findings).

B. Cost Allocation Plan

All applicant organizations must submit with the proposal: A single complete copy of the applicant organization's approved cost allocation plan. The cost allocation plan is a document that identifies and distributes the cost of services and/or departments or function according to the benefit received. It is a means to substantiate and support how shared costs of a program are charged to a particular cost objective. Formal accounting records to substantiate the charges must support all costs included in the plan including information technology.

C. Allowable Costs / Cost Principles
Sub-recipients must follow federal allowable cost principles which apply to their specific organizations and which are included in the appropriate circulars issued from the Office of Management and Budget.

D. Fidelity Bond

If selected and prior to the initial disbursement of funds, a written statement from the insurer that all persons handling WIOA federal funds are covered by a fidelity bond equal to the maximum WIOA cash on hand.

E. Fiscal Management / Internal Oversight

Contractors are required to maintain complete and accurate records of all financial expenditures with supporting documentation. These records must be available to The Board’s staff. Contractors are required to internally monitor fiscal activities to insure compliance with the WIOA legislation and applicable federal cost principles. At a minimum, internal oversight will address the following:

1. That Workforce Solutions staff has verified eligibility prior to participant program enrollment;
2. Participant attendance and payroll disbursement have been properly documented;
3. Program expenditures are supported by appropriate documentation;
4. Budget allocations and expenditures comply with contracted obligations; and,
5. Accounting records are traceable to the source document and the application of grant funds relating to authorizations, obligations, balances, liabilities, expenditures and income.

F. Internal Program Management Plan

All program activities must be internally monitored on a scheduled basis to ensure compliance with all aspects of the contract, written policies, and the legislation. At a minimum, this monitoring will include:

1. Program service delivery as it relates to the contract, including review and evaluation of the key program elements required under the WIOA;
2. Program activity assignments and how they correspond to participant assessments;
3. Effectiveness of work sites including mentoring and supervision;
4. Participant attendance;
5. Frequency of case management sessions and documentation; and,
G. Partner Agreements

Respondents partnering with other agencies and employers must complete signed Partner Agreements detailing services to be provided. The signed agreements must be included with the proposal. If a partner agreement is developed and supported by WIOA funds; costs must be included in the line item budget of the WIOA proposal. If WIOA funds are used to support Partner Agreements, the Contractor will be responsible for insuring that the partner(s) deliver(s) the services as outlined in the agreement and applicable performance goals are achieved. In addition, the Contractor must insure all funds expended by the partner(s) are in compliance with federal regulations and applicable OMB guidelines. Disallowed costs by the partner(s) agency will be the liability of the Contractor. If a Partner Agreement is amended or cancelled, written notice must be submitted the Board prior to finalization. If WIOA funds are affected, a modification to the contract must be approved and completed. NOTE: If a Partner Agreement supported by WIOA funds is not included in the original proposal submission and it is determined at a later date that specific services are needed, a competitive procurement process must be initiated. A sub-contractor agreement must be completed and staff of the Board must approve the sub-contract. A competitive procurement process also is required if a Partner Agreement is terminated at any time prior to the end of the contract period and a new partner is identified to deliver those services.

H. Types of Contracts

Contracts awarded as a result of this RFP will be negotiated on a fixed-unit price per individuals.

I. RFP Amendments

Contradictions, errors, misinformation, etc., discovered in the RFP may require an amendment.

J. Stand Alone

All proposals must be written to "stand alone"; as if no other proposals were submitted. Each proposal submitted must be written in such manner that if only one was funded, that one could still be successful without additional funding. However, if more than one proposal from a single respondent is funded, the Board reserves the right to identify and eliminate duplicative costs and/or other elements during contract negotiations.

K. Limitations

This RFP does not commit the Board or the City of Providence to award a contract or to pay for any of the costs in the preparation of a proposal. The Board reserves the right to accept or reject any or all proposals received as a result of this request or to cancel in part or in its entirety this RFP, if it is in the best interest of the Board or the City of Providence to do so. In addition, the Board reserves the right to waive any and all requirements of the RFP. The Board reserves the right not to fund any proposal solely due to the submission of the lowest cost or receipt of the highest ranked proposal. All contract awards are subject to the availability of Federal and State funds and the execution of a contract that is acceptable to both the selected respondent and the Board.
SUPPLEMENTAL INFORMATION

If the issuing department for this RFP determines that your firm’s bid is best suited to accommodate their need, you will be asked to provide proof of the following prior to formalizing an award.

An inability to provide the outlined items at the request of the department may lead to the disqualification of your bid.

This information is NOT requested to be provided in your initial bid that you will submit to the City Clerk’s office by the “date to be opened” noted on page 1. This list only serves as a list of items that your firm should be ready to provide on request.

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record.

You must be able to provide:

- Business Tax ID will be requested after an award is approved by the Board of Contract and Supply.
- Information on Worker’s Compensation Policies will be requested after an award is approved by the Board of Contract and Supply.
- Information regarding an Insurance Declaration Page will be requested after an award is approved by the Board of Contract and Supply.
- A copy of the most recent audit will be requested during the contract negotiation process.