**PROPOSER INFORMATION**

Proposer Name: Click here to enter text.

Authorized Representative Name & Title: Click here to enter text.

Address: Click here to enter text.

Telephone: Click here to enter text.

Email: Click here to enter text.

Website: Click here to enter text.

Legal Status: [ ]  For-Profit [ ]  Nonprofit [ ] Sole Proprietor/Individual [ ] Partnership

Women Owned: [ ]  Yes [ ]  No

Minority Owned: [ ]  Yes [ ]  No

If yes, select the ethnicity:

[ ]  American Indian or Alaska Native [ ]  Black or of African decent

[ ]  Hispanic or Latino/a [ ]  Native Hawaiian/Pacific Islander

[ ]  Western Asian/Middle Eastern [ ]  East Asian/Far Eastern

[ ]  South Asian/Indian (Subcontinent) [ ]  Southeast Asian

[ ]  Other Asian [ ]  Multi-racial

Self-Describe: Click here to enter text.

Faith Based: [ ]  Yes [ ]  No

Partners included in this Proposal: Click here to enter text.

How did you hear about this RFP? *Please be specific.* Click or tap here to enter text.

**PROPOSAL INFORMATION**

Which programming are you proposing to provide?

* Out-of-School Time (OST) Programming
* Teen Programming

Total dollar amount requested: Click here to enter text.

Proposal summary *(please use only one sentence)*:

Click here to enter text.

**REQUIRED CONTACTS**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Phone** | **Email** |
| Chief Executive Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| Contract Processing Contact | Click here to enter text. | Enter number. | Click here to enter text. |
| Chief Information Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| Chief Financial Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| MPER Contact\* | Click here to enter text. | Enter number. | Click here to enter text. |

*\** [*MPER*](http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Data-Processing/MPER.aspx) *is DHS’s provider and contract management system. Please list an administrative contact to update and manage this system for your agency.*

**BOARD INFORMATION**

*\* For the Board Chairperson, you must list an address, phone and email address different than the organization.*

Board Chairperson Name & Title: Click here to enter text.

Board Chairperson Address: Click here to enter text.

Board Chairperson Telephone: Click here to enter text.

Board Chairperson Email: Partners included in this Proposal: Click here to enter text.

How did you hear about this RFP? *Please be specific.* Click or tap here to enter text.

**REFERENCES**

Provide the name, affiliation and contact information [include email address and telephone number] for three references who are able to address relevant experience with your organization.

*Please do not use employees of the Allegheny County Department of Human Services as references.*

Click here to enter text.

**CERTIFICATION**

Please check the following before submitting your Proposal, as applicable:

[ ]  I have read the standard County terms and conditions for County contracts and the requirements for DHS Cyber Security, EEOC/Non-Discrimination, HIPAA and Pennsylvania’s Right-to-Know Law.

[ ]  By submitting this Proposal, I certify and represent to the County that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient’s decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFP.

Choose one:

[ ]  My Proposal contains information that is either a trade secret or confidential proprietary information and I have included a written statement signed by an authorized representative identifying those portions or parts of my Proposal and providing contact information.

OR

[ ]  My Proposal does not contain information that is either a trade secret or confidential proprietary information.

**ATTACHMENTS**

Please submit the following attachments with your Response Form.

* + - * Partner commitment letters, if applicable
			* MWDBE and VOSB documents *(see Sections 6.1 and 6.2 of the RFP for more details)*
			* W-9

**REQUIREMENTS**

Please respond to the following. **All Proposers must complete the Organizational Experience, Program Design, Implementation Challenges and Budget Sections.** The score from these sections will be added to the score for each Program proposed. The maximum score a Proposal can receive for each type of Programming is:

* Out-of-School Time (OST) Programming = 120 points possible
* Teen Programming = 95 points possible

Only complete the sections for the Programming you wish to propose. Programming not included in your Proposal may be left blank. Please stay within the page limit listed at the top of each section.

*All Proposers must complete these sections. Your response to this section must not exceed 7 pages.*

***Organizational Experience (20 points)***

1. Describe your organizational experience providing the proposed Programming. Please include examples of ways in which your organization will connect with the target population, including their families, if applicable. (10 points)

Click here to insert text

1. Describe your organizational experience working in high-need communities. (5 points)

Click here to insert text

1. Describe your organizational commitment to serving all individuals regardless of their race, religion, ethnicity, sexual orientation, gender identity and expression (SOGIE), intellectual or physical ability, English language proficiency or life experiences. Please include specific approaches used and examples of how they are reflected in your work. (5 points)

Click here to insert text

***Program Design (35 points)***

1. Provide an overall description of your proposed Programming:
* Describe how your Program will provide a physically and emotionally safe space for the proposed target population and how you will ensure that they and their parents/caregivers feel safe, where applicable. Provide a brief description of current or proposed safety policies and procedures. Describe the physical location you intend to use. (10 points)
* Describe how your Program will provide the proposed target population with opportunities to make positive connections with peers, adults and their community. Include a brief description of your organization’s code of conduct for staff, staff training expectations, and policies and procedures. (10 points)
* Describe how you will staff your Program and the strategies you will use to recruit, hire and retain racially diverse staff, staff with relevant lived experience and staff that reflect the population served. (5 points)
* Describe how you will market your proposed Program and open referral pathways. Provide a description of how you will build and sustain relationships with schools, if applicable. (5 points)
* Describe why the proposed target population will want to participate in your Programming. Describe the methods of engagement you intend to use. (5 points)

Click here to insert text

***Implementation Challenges (15 points)***

1. If your proposed Program experiences low attendance, how will your organization engage more of the target population? (5 points)

Click here to insert text

1. Describe the actions you will take if a participant experiences behavioral or mental health issues. (5 points)

Click here to insert text

1. Describe the actions your organization will take if a participant expresses an issue or requests help outside of what your Programming can provide. (5 points)

Click here to insert text

***Teen Programming (15 points)***

*Complete this section only if you are proposing to provide this Programming. If you are not proposing this Program, please leave this section blank. Your response to this section must not exceed 1 page.*

1. Provide an overall description of your proposed Program and how it will provide teens with the opportunity to engage in enriching and interesting activities. If applicable, include how input from teens and/or best practice research was/will be taken into consideration in the design of the Programming. (10 points)

Click here to insert text

1. Describe how your Program will set teens on a positive trajectory toward adulthood and any skills you expect teens to acquire (e.g., socioemotional, leadership, workforce-related, conflict resolution). (5 points)

Click here to insert text

***Out-of-School Time (OST) Programming (40 points)***

*Complete this section only if you are proposing to provide this Program. If you are not proposing this Programming, please leave this section blank. Your response to this section must not exceed 5 pages.*

1. Describe how you will provide opportunities for youth to engage in enriching activities and how the activities align with the Programmatic Content expectations outlined in Section 2 of the RFP. Provide an example of a week’s schedule of activities. (10 points)

Click here to insert text

1. Describe the community(ies) in which you intend to locate your OST Program. Why did you select those community(ies)? How will you tailor your Programming to respond to the unique needs of the community(ies) you are serving? (10 points)

Click here to insert text

1. Describe your approach to communicating with parents/caregivers. Provide specific methods you will use to ensure that parents/caregivers feel comfortable with your OST Programming and confident that their youth/child is safe and well cared for. (5 points)

Click here to insert text

1. If the results of the annual parent survey indicate that parents are not satisfied with the experience of their children in your Program, what will you do? (5 points)

Click here to insert text

1. Provide the hours and days you expect your OST Programming to operate during the school year. (5 points)

Click here to insert text

1. Describe your plan for storing and providing healthy snacks and meals during the school year. (5 points)

Click here to insert text

***Budget and Budget Narrative (10 points)***

1. Attach a detailed line-item budget that reflects a realistic estimate of the costs associated with implementing and sustaining the proposed Programming. If any startup costs are identified, they should be clearly indicated. (5 points)
2. Provide a budget narrative that clearly explains and justifies all line items in the proposed budget. *For OST Programming, include a description of the funding model of your proposed Program (e.g., a mixed model of private pay, subsidy and free spots; only free spots)* (5 points)