



# **WORKFORCE SOLUTIONS**

## of the Coastal Bend

**TO:** Interested Parties

**FROM:** Kenneth A. Trevino, President/CEO

**DATE:** October 8, 2019

**SUBJECT:** REQUEST FOR QUALIFICATIONS - FINANCIAL AUDIT SERVICES

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The Coastal Bend Workforce Development Board, d.b.a. Workforce Solutions of the Coastal Bend, is soliciting a firm to provide financial audit services for the Board for Fiscal Year 2018-2019 (October 1, 2018 through September 30, 2019). The audit work will need to be completed by May 31, 2020. The Board expects the audit work to be performed during the period of February 24<sup>th</sup> through April 30, 2020.

All inquiries should be directed to Robert Ramirez at (361) 885-3013 or [robert.ramirez@workforcesolutionscb.org](mailto:robert.ramirez@workforcesolutionscb.org). Mailed and hand delivered copies are acceptable.

*Workforce Solutions of the Coastal Bend is an Equal Opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Deaf, hard-of-hearing or speech impaired customers may contact Relay Texas: 1-800-735-2989 (TDD) and 1-800-735-2988 7-1-1 (Voice). Historically Underutilized Businesses (HUB's) are encouraged to apply.*

# REQUEST FOR QUALIFICATIONS

*Issued by*



## **WORKFORCE SOLUTIONS** of the Coastal Bend

*For*

### **Financial Audit Services**

Responses to be submitted to the

Coastal Bend Workforce Development Board (d.b.a. Workforce Solutions of the Coastal Bend)

520 North Staples, Corpus Christi, TX 78401 (if hand-delivered)

P.O. Box 2568, Corpus Christi, TX 78403 (if mailed)

Issue Date: Monday, October 8, 2019, 2:00 p.m. (CST)

**Pre-Proposer Conference: Thursday, October 10, 2019, 2:00 p.m. (CST)**

**Responses Due Date and Time: Tuesday, November 5, 2019, 4:00 p.m. (CST)**

Procurement is open and subject to the availability of funds

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*Babel Notice: This document contains vital information about requirements, rights, determinations, and/or responsibilities for accessing workforce system services. Language services, including the interpretation/translation of this document, are available free of charge upon request.*

*Este documento contiene información importante sobre los requisitos, los derechos, las determinaciones y las responsabilidades del acceso a los servicios del sistema de la fuerza laboral. Hay disponibles servicios de idioma, incluida la interpretación y la traducción de documentos, sin ningún costo y a solicitud.*

**COASTAL BEND WORKFORCE DEVELOPMENT BOARD**  
**(d.b.a.) WORKFORCE SOLUTIONS OF THE COASTAL BEND**  
**REQUEST FOR QUALIFICATIONS (RFQ)**  
**FINANCIAL AUDIT SERVICES**

**PART I. GENERAL INFORMATION**

**Purpose of Request for Qualifications:**

Using the Request for Qualifications (RFQ) method of procurement, the Coastal Bend Workforce Development Board (d.b.a. Workforce Solutions of the Coastal Bend) is soliciting responses from firms to provide financial audit services to the Board for Fiscal Year 2018-2019 (October 1, 2018 through September 30, 2019). An annual audit is required of the Board at the end of each fiscal year. A Certified Public Accountant will provide services that will include, but not limited to: providing an annual financial and compliance audit of the Board's records.

**Background:**

The Coastal Bend Workforce Development Board (Board) manages workforce development programs administered through career centers that provide workforce development services to area businesses and residents. The Board of Directors are local community members who are volunteers representing various employment and community sectors in the 11-county Coastal Bend region. The Board manages approximately \$30-million in workforce development programs, which are administered through Workforce Solution's Career Centers, performing workforce development activities for area businesses and residents. The primary responsibility of the Board is to provide oversight of the delivery of workforce services, policy and program guidance and evaluation of workforce development programs and services that effect area employers, residents and job seekers.

The programs that the Board administers include: employment and training programs funded under the Workforce Innovation and Opportunity Act (WIOA), child care programs, welfare reform programs such as Temporary Assistance for Needy Families (TANF) Choices Program and Supplemental Nutrition Assistance Program (SNAP). The Board is also responsible for planning and overseeing the Wagner-Peyser Employment Services (ES) Program.

The 11-county area served by Workforce Solutions of the Coastal Bend includes: Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, Nueces, Refugio, and San Patricio counties.

The Board recognizes that Coastal Bend employers are a priority customer. Resolving the concerns of regional employers has become one of the primary goals of the Board. The Board is charged with providing expanded and improved activities for Coastal Bend employers, which includes identifying key trends and major external treats affecting today's local employers, as well as capitalizing on existing opportunities available in the community.

**Funding:**

Funding for the Board's operations and programs is provided primarily by the Texas Workforce Commission (TWC) under the Workforce Innovation and Opportunity Act (WIOA) and other federal programs. Workforce Solutions of the Coastal Bend is an equal opportunity Employer/Programs and ADA accessible. Auxiliary aids will be provided upon

request. Telephone access is available through TDD 1 (800) RELAY TX, Voice – 1 (800) RELAY VV. Historically Underutilized Businesses (HUBs) are encouraged to participate in all procurement programs.

**Time-Frame:**

**The deadline for responses is Tuesday, November 5 2019, at 4:00 p.m. (CST).** If you have any questions in regards to this solicitation, please contact Robert R. Ramirez, Procurement and Contracts at (361) 885-3013. **All responses must be delivered to and received prior to this deadline.** Responses received after the deadline will not be considered.

**Pre-Proposer's Conference:**

A bidder's conference meeting is scheduled on **Thursday, October 10, 2019, 2:00 p.m. (CST)**. The meeting will be held at the Workforce Solutions Career Center, 520 North Staples Street, Corpus Christi, Texas. The purpose of the meeting will be to provide information on the services requested and to respond to questions regarding the solicitation. Attendance is not mandatory; however if you are unable to attend in person, you may participate via **GoToMeeting** at: <http://global.gotomeeting.com/join/831062461>. To listen to the conference, dial in using your phone: 1+ (872) 240-3212, access code 831-062-461.

**PART II. SERVICES REQUESTED**

The Board is soliciting a qualified audit firm to:

1. Provide an annual financial and compliance audit of the Board's records for the Fiscal Year beginning October 1, 2018 through September 30, 2019. **The audit work must be completed by May 31, 2020.** The Board expects the audit work to be performed during the period of **February 24<sup>th</sup> through April 30, 2020.**
2. Present audit report and findings to the Board staff and Board of Directors at their respective committee and Board meetings.

**Additional Information:**

The Board uses the modified basis of accounting in measuring financial position and operating results for all levels of funding. Fund accounting is utilized for each grant on computerized accounting software system – Abila Fund Accounting (known as MIP). Generally accepted accounting principles and procedures mandated by the U.S. Department of Labor and Texas Workforce Commission and fiscal procedures as outlined in the TWC Financial Manual of Grants and Contracts (FMGC) are followed.

**PART III. GENERAL REQUIREMENTS AND PROVISIONS**

**Payment Terms:**

Payment for contracted services will be reimbursed by submitting an invoice with proper documentation by the tenth (10<sup>th</sup>) of each month for costs incurred during the previous month. The invoice will be submitted to the Board's fiscal department for payment. Invoice will be paid within three (3) weeks of receipt of complete and accurate information.

Invoices shall be submitted to the fiscal department via e-mail at: [fiscal@workforcesolutionscb.org](mailto:fiscal@workforcesolutionscb.org).

**Contract Period and Renewal:**

The contract will be awarded for a specified period not to exceed twelve (12) months. Contract renewals are done so at the discretion of the Board, based upon need, availability of funds, and the Contractor's satisfactory performance. In accordance with written policies and procedures of the Board, this Contract may be extended for two (2) additional one-year contract periods beyond the original acceptance/award, not to exceed a total of three years.

**Eligible Respondents:**

Respondents who are able to meet the solicitation specifications regarding qualifications, knowledge, experience, and other terms of the solicitation, and who are not debarred and/or suspended from conducting business with federal and state funded agencies may submit a response. A prospective respondent must affirmatively demonstrate their responsibility. A prospective respondent, by submitting a response, represents to the Board that it meets the following requirements:

- Possess or is able to obtain financial resources as required to perform under this solicitation;
- Is able to comply with the required or proposed solicitation;
- Have a satisfactory record of integrity and ethics; and
- Be otherwise qualified and eligible to receive an award.

**Procurement Conditions and General Terms:**

Procurement of these items shall be accordance with the state Texas Workforce Commission procurement policies and Workforce Solutions of the Coastal Bend procurement policies and general terms as follows:

- Workforce Solutions of the Coastal Bend reserves the right to accept or reject any or all bids/quotes received or to cancel or extend in part or it's entirely, this solicitation, or to make partial awards.
- Workforce Solutions of the Coastal Bend is exempt by law from payment of Texas Sales Tax and Federal Excise Tax.
- The intent of this solicitation is to identify the various contract alternatives and estimates of costs for the items solicited. Workforce Solutions of the Coastal Bend is under no legal requirement to execute a contract from any bid/application submitted.
- Positive efforts shall be made to utilize Historical Underutilized Businesses (HUBs, i.e., minority and female-owned or operated businesses) as vendors, and to allow such organizations maximum feasible opportunity to compete for award.
- Award of purchase agreement or contract shall be made only to a responsible respondent/bidder(s), i.e., a bidder/vendor who has demonstrated competence to deliver the specified goods/services, a proven record of business integrity and ethics, and the ability to meet the requirements of the solicitation.
- Respondents/bidders shall not make offers of gratuities or favors, to any officer, employee, Board member of Workforce Solutions of the Coastal Bend, or any subcontractor employees of Workforce Solutions of the Coastal Bend. Contact for technical assistance is allowed with the solicitation contact person or designated Workforce Solutions of the Coastal Bend Board staff. Violation of this instruction will result in immediate rejection of the response/bid/application.
- The contents of a successful bid may become contractual obligations, if a contract is awarded. Failure of the respondent/bidder to accept those obligations may result in the cancellation of the response/bid/application for selection. The contents and requirements of this solicitation may be incorporated into any legally binding

and duly negotiated contract between Workforce Solutions of the Coastal Bend and the selected respondent(s)/bidder(s). Workforce Solutions of the Coastal Bend reserves the right to withdraw or reduce the amount of an award or to cancel any contract resulting from this procurement if there is misrepresentation or errors in the specifications, pricing, terms, or Respondent's/Bidder's ability to meet the terms and conditions of this solicitation or if adequate funding is not received.

- All responses/bids and their accompanying attachments will become property of the Workforce Solutions of the Coastal Bend after submission and materials will not be return. In addition, all materials that are produced as a result of this solicitation become property of Workforce Solutions of the Coastal Bend.
- Workforce Solutions of the Coastal Bend specifically reserves the right to vary the provisions set herein anytime prior to the execution of the contract where such variance is deemed to be in the best interest of Workforce Solutions of the Coastal Bend.
- A response does not commit Workforce Solutions of the Coastal Bend to award a purchase agreement or contract or to pay any costs incurred in the preparation of a response nor pay for any costs incurred prior to the execution of a formal purchase agreement or contract unless such costs are specifically authorized in writing by Workforce Solutions of the Coastal Bend.
- Workforce Solutions of the Coastal Bend reserves the right to contact any individual, agency, or employers listed in the solicitation's response, to contact others who may have experience and/or knowledge of the respondent's/bidder's goods/supplies/services, relevant performance, qualifications, etc. and to request additional information from any and all respondents/bidders.
- No employee, officer, or member of the Board shall participate in the selection, development of a response to this solicitation, award or administration of a contract supported by the solicitation if a conflict of interest, real or apparent, would be involved.
- No purchase agreement or contract may be awarded until respondent/bidder has complied with Executive Order 12549, 29 CFR, Part 98 by submitting a signed Certification of Debarment, which states that neither the vendor, nor any of its principles, are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in a procurement by any Federal department or agency.
- In the interest of maximum free and open competition, all Workforce Solutions of the Coastal Bend members and staff will be prohibited from providing technical assistance or answering questions concerning this solicitation which may be construed as offering a competitive advantage to any respondent/bidder. Potential respondents/bidders are requested to respect these conditions by not making personal requests for assistance.
- Workforce Solutions of the Coastal Bend is an equal opportunity employer and complies fully with the nondiscrimination and equal opportunity provisions of the applicable laws. Each organization or individual that submits a response to a solicitation warrants and assures that it will comply fully with the non-discrimination and equal opportunity provisions as required by 29 CFR parts 37.20(a)(1). Each applicant for financial assistance under Workforce Investment Opportunity Act {WIOA} (formerly Title I of WIA, as defined in §37.4), must include the following assurances: As a condition to the award of financial assistance from the Department of Labor Workforce Investment Opportunity Act {WIOA} (formerly under Title I of WIA), the grant applicant assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws:

Workforce Investment Opportunity Act {WIOA} (formerly Section 188 of the Workforce Investment Act of 1998 (WIA), which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on

the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIA Title I—financially assisted program or activity;

Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the bases of race, color and national origin;

Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities;

The Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and

Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs.

The grant respondent/applicant also assures that it will comply with 29 CFR Part 37 and all other regulations implementing the laws listed above. This assurance applies to the grant applicant's operation of the WIA Title I-financially assisted program or activity, and to all agreements the grant applicant makes to carry out the WIOA (formerly WIA Title I) financially assisted program or activity. The grant applicant understands that the United States has the right to seek judicial enforcement of this assurance.

#### **Insurance Requirements:**

The Contractor will be required to maintain insurance coverage for the period of the contract. Contractor must obtain insurance adequate to cover Contractor's employees and against personal and bodily injury and property damage. The following minimum insurance coverage and limitations will be required;

- General liability insurance for personal injury and bodily injury and property damage to a third party. The required minimum coverage shall be \$500,000 per occurrence or \$1,000,000 aggregate.
- Workers Compensation insurance shall be required for all the Contractor's employees that will be working under this contract. However, if the Contractor meets the definition of "Independent Contractor", as defined by the State of Texas, the Contractor must sign a waiver agreeing to this independent relationship. The waiver form can be provided upon request.

In the event you are awarded the contract, the Contractor will be required to submit proof of insurance. A statement of assurance to that effect must be included in your transmittal letter and Statement of Work response.

#### **PART IV. INFORMATION ON EVALUATION AND SELECTION CRITERIA:**

1. All respondents considered must be responsive to the RFQ instructions.
2. Workforce Solutions of the Coastal Bend will base its selection on Qualifications, Knowledge, and Relevant Experience, Staffing, References/Past Experience, and Responsiveness to the RFQ. The object is to obtain high-quality audits. **Reasonableness of costs will also be reviewed, but will not be considered as part the rating.**
3. Workforce Solutions of the Coastal Bend will make a good faith effort to award contracts to Historically Underutilized Businesses (HUBs).

4. All respondents will receive notification of proposal/bid/application approval or non-approval. A proposer/bidder/applicant who wishes to protest the decision will be required to notify the Board's Complaint Officer, in writing, within fifteen (15) days from the date of the notification letter. The complainant letter must specify the nature of the protest and desired remedies of action. Workforce Solutions of the Coastal Bend reserves the right to determine whether the protest is valid and merits further consideration.

#### **Response Evaluation Criteria:**

The review and selection process will include the following criteria and value system:

#### **QUALIFICATIONS, KNOWLEDGE, & RELEVANT EXPERIENCE**

**VALUE 50 POINTS**

This criterion examines the qualifications and knowledge and skills of the respondent which been derived from actual work experiences with the workforce development programs and the requirement of a minimum of five (5) years of relevant prior experience. Proposer's experience should also include knowledge of federal and state administrative regulations, regulatory requirements, open government and public information issues, policies, employment, finance, contracts and administrative and judicial litigation.

#### **STAFFING**

**VALUE 30 POINTS**

This criterion is a measure of the proposer's availability of staff with professional qualifications and technical abilities to perform the services requested. Points will be awarded based on (1) the proposer's plan for delivering the services with the appropriate personnel, and (2) other technical resources available and designated for this contract.

#### **REFERENCE/PAST EXPERIENCE**

**VALUE 10 POINTS**

The references/past experiences will be evaluated in terms of the amount of experience in dealing with Workforce Development Boards and other local and state government entities within the last five (5) years.

#### **RESPONSIVENESS TO THE RFQ**

**VALUE 10 POINTS**

Understanding the needs and services required and understanding of the new Uniform Guidance; Peer Review, and external quality control reviews will be evaluated as factors in selecting an auditor.

#### **HUB**

**VALUE 5 POINTS**

Historically Underutilized Business as certified by the State of Texas. To be awarded the points as a HUB, respondent must submit a copy of the current certification by the State of Texas.

### **PART V. SUBMISSION INSTRUCTIONS**

#### **How To Submit a Response:**

Responses must be submitted **prior** to the deadline and must clearly indicate externally the Respondent's name and mailed or hand deliver to the following address:



**Robert R. Ramirez, Procurement and Contracts**  
**Workforce Solutions of the Coastal Bend**  
**Street Address: 520 North Staples, Corpus Christi, TX 78401**  
**Mailing Address: P.O. Box 2568, Corpus Christi, TX 78403**  
**(361) 885-3013**

**Proposal Format and Preparation:**

Each respondent must submit one (1) original paper copy with original signatures and three (3) externally labeled USB flash drives containing a single digital file of the entire proposal and all requested materials. The copies must mirror the original document. Respondents will be responsible for the completeness of the digital files. The original document should contain the word: **ORIGINAL**” typed or hand written on the right hand corner of the cover page of the document.

All responses must be typed and completed on 8 1/2” x 11” paper, with all pages sequentially numbered and bound.

Each response must contain Attachments/Certifications A through K in the order as shown below. Note – during the respective review, documentation regarding submission of all attachments/certifications will be verified; quality or completeness of the submission will not be a consideration at this time of the process. Points will be deducted during the scoring process for omission of information.

Response packages should be organized in the manner specified below:

- Proposals should be prepared in a concise manner. Clarity of content and completeness are essential.
- Use the Certification by Respondent form (Attachment A) of the RFQ as the cover sheet.
- Each response must include a written narrative which addresses the questions regarding the respondent's planned activities and schedule under the Statement of Work response (Attachment B) of this RFQ.

**ATTACHMENTS TO BE COMPLETED AND RETURNED WITH EACH RESPONSE:**

The attachments listed below are required. All forms must be signed, dated, and completed.

Attachment A - Certification By Bidder/Applicant  
Attachment B - Statement of Work/Your Response  
Attachment C - Certification Regarding Lobbying and Debarment  
Attachment D - Certification Regarding Texas Corporate Franchise Tax  
Attachment E - State Assessment Certification  
Attachment F - Workforce Solutions of the Coastal Bend Disclosure of Interests  
Attachment G – Undocumented Worker Certification  
Attachment H - Customer Rights & Compliant Resolution Procedure  
Attachment I – Other Attachments (Resumes of staff providing services or other materials requested or referred to in the narrative should be labeled and included here.)  
Attachment J – References  
Attachment K- Peer Review

Mail or deliver in person the hard copy (original document) and copies (on the required USB flash drives) of the response/application to the Board's administrative offices.

## **PART VI – SPECIFICATIONS (STATEMENT OF WORK)**

Specifications should be considered minimum requirements. Addendum items may be inserted into the solicitation specifications should they arise during the solicitation process, which will be made available to all respondents in writing.

In the order specified below, please provide a written response to each of the following questions. Be sure to cover all important points and, at the same time, be as concise as possible. (Note: points will be deducted for questions not answered.)

### **Audit Approach**

1. Describe the scope of services your firm proposes to provide in terms of both financial statements and compliance examination. (Note: the audit work plan should address and demonstrate your understanding of the audit requirements of the Single Audit as specified in OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 CFR 200.) The audit work plan should specify what work will be accomplished to allow you to render: (a) an opinion report on the financial statements, (b) a report on the study and evaluation of internal controls, and (c) reporting on the organization's control system to assure compliance.
2. Describe your anticipated utilization of Board staff, if applicable. **(Note: The Board staff is usually not available during the period of the 15<sup>th</sup> to 20<sup>th</sup> of the month due to closing the month and submitting the fiscal report to the Texas Workforce Commission.)**
3. Describe your methodology for accomplishing the audit work requirements in the timely and efficient manner, and any special techniques you may employ to facilitate this first year engagement. Provide assurances that your firm will complete the audit work within the required timeframe as specified in the RFQ.
4. Specify the work papers to be provided by Board staff.
5. Submit time estimates for each segment of the work plan to be performed by the firm's staff (indicate staff level) to be assigned. Where possible, individual staff members should be named and their titles provided.
6. What are the firm's workspace requirements?

### **Proposer's Qualifications**

Identify the responsible partner(s) and appropriate supervisors who will work on the audit. Resumes for each should be included, and specific governmental and non-profit experience should be indicated as well as Certified Public Accountant credentials. Other staff assisting in the audit should also be identified, including their resumes and past experience.

- List number of clients in industry similar to the Board, non-profits and Workforce Development.
- List the States in which the firm is licensed to conduct business.
- Whether the firm is subject to any current litigation?
- Whether the firm has been the subject of any AICPA or state CPA society Ethics referrals?
- The firm's working paper retention and access policies and requirements.
- Whether the firm has insurance and coverage errors and omissions, workers compensation?
- Prior industry experience and training of the partner in charge of the engagement and other key firm personnel; pertinent to the engagement, include continuing professional education specific to our industry in the past three years.

### Proposer's Profile

Provide a clear description of each of the following:

1. Organizational type, size, and whether local, regional, or national in scope of operations.
2. Location of business headquarters, location of office that would provide services to the Board and the number of professional staff by staff level at that office or any office (with proposed billing rates for each), which would provide services.
3. Range of services performed by the office (where work is to be done) such as auditing, accounting, tax service, or management services.

### Experience

Describe most recent auditing experience similar to type requested.

1. List your firm's experience working with workforce programs such as: WIA, TANF, SNAP, Child Care Programs, or other Texas Workforce Commission or U.S. Department of Labor programs.
2. List the experience that key personnel have in education and experience in the type of work that the audit entails.
3. Provide a minimum of five (5) references for Single Audits performed that meet OMB Circular A-133 guidelines in the last 5 years, including the names, addresses, and telephone numbers of client officials, and if have perform audits under the new Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards at CFR 200. **Please include this information in Attachment J, "References". Additionally, submit a copy of the last peer review report letter. Attach the letter to the information requested under Attachment K.**
4. Has a peer review done in the last three (3) years? Include the peer review as Attachment K.
5. Did the peer review result in an unmodified report? If not, provide an explanation of finding and inquire about status of any follow-up action required by the peer review committee.
6. If a member of your team that is depended upon to perform a significant portion of the work on the project can no longer perform the work, how would you handle the change and notify the Board of the change in key assignments?

### Fee for Services

Please provide a fee structure for all billing for audit services to the Board. The fee schedule should include hourly billings for (if applicable), and how the amount was computed:

- Attendance at monthly committee and Board meetings (per meeting or hour):
- Partner time (per hour):
- Manager (per hour):
- Senior (per hour):
- Staff (per hour):
- Copying charges:
- Telephone/facsimile charges (local and long distance):
- Travel expenses (if applicable):
- Mileage:
- Any other applicable related charges (please specify):

**Note: Respondents will be asked to submit costs but costs will not be considered as part of the rating.**

**ATTACHMENT A**  
**CERTIFICATION BY PROPOSER**  
**for**  
**FINANCIAL AUDIT SERVICES**

**I. IDENTIFICATION OF RESPONDENT**

Name of Individual Responding: \_\_\_\_\_

Name of Firm (if applicable): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

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

Email address: \_\_\_\_\_

How many years has your firm been providing similar services. \_\_\_\_\_

How many years of direct knowledge working with Workforce Boards. \_\_\_\_\_

How many years of experience do you have working with non-profits. \_\_\_\_\_

Is your firm registered with the state General Services Commission as a HUB. \_\_\_\_ Yes \_\_\_\_ No

(If your firm is certified as a HUB by the State of Texas, please provide a copy of the current certification.)

Provide a brief description of your organizations, legal status, size, and whether it is local

regional, or national in operation. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ATTACHMENT A

**CERTIFICATION BY PROPOSER**

**II. DESCRIPTION OF SERVICES PROVIDED**

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When can you/ will you be available to perform services. \_\_\_\_\_

**III. SIGNATURE**

**Respondent certifies that each attachment to this Statement of Qualifications has been completed and is submitted as integral to this Statement.**

**I certify that I am authorized to submit this Statement on behalf of the above named organization. If any information changes significantly, the Workforce Solutions of the Coastal Bend will be notified. I certify that the contents of this document are true and correct.**

Signature of Respondent:\_\_\_\_\_

Date Proposal Form Submitted:\_\_\_\_\_

**ATTACHMENT B**  
**STATEMENT OF WORK/ YOUR RESPONSE**

## ATTACHMENT C

### **CERTIFICATONS REGARDING LOBBYING, DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS, AND DRUG-FREE WORKPLACE REQUIREMENTS**

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Lobbying: This certification is required by the Federal Regulations, implementing Section 1352 of the Program Fraud and Civil Remedies Act, Title 31 U.S. Code, for the Department of Education (34 CFR Part 82), Department of Health and Human Services (45 CFR Part 93).

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The undersigned service provider certifies that:

- (1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan or cooperative agreement.
  - (2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form – LLL, “Disclosure Form to Report Lobbying”, in accordance with its instructions.
  - (3) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.
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Debarment, Suspension, and Other Responsibility Matters: This certification is required by the Federal Regulations, implementing, Executive Order 12549, Government-wide Debarment and Suspension, for the Department of Agriculture (7 CFR Part 3017), Department of Labor (29 CFR Part 98), Department of Education (34 CFR Parts 85, 668 and 682), Department of Health and Human Services (45 CFR Part 76).

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The undersigned service provider certifies that neither it nor its principals:

- (1) Are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency.
- (2) Have not within a three-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, State or Local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity with commission of any of the offenses enumerated in Paragraph (2) of this certification; and,
- (4) Have not within a three-year period preceding this contract had one or more public transactions terminated for cause or default.

Where the prospective recipient of federal assistance funds is unable to certify to any of The statements in this certification, such prospective recipient shall attach an explanation to this certification.

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Drug-Free Workplace: This certification is required by the Federal Regulations, implementing Sections 5151-5160 of the Drug-Free Workplace Act, 41 U.S.C. 701; for the Department of Agriculture (7 CFR Part 3017), Department of Labor (29 CFR Part 98), Department of Education (34 CFR Parts 85, 668 and 682), and Department of Health and Human Services (45 CFR Part 76).

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The undersigned service provider certifies that it shall provide a drug-free workplace by:

- (a) Publishing a policy statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the consequences of any such action by an employee;
- (b) Establishing an ongoing drug-free awareness program to inform employees of the dangers of drug abuse in the workplace, the Service provider's policy of maintaining a drug-free workplace, the availability of counseling, rehabilitation and employee assistance programs, and the penalties that may be imposed on employees for drug abuse violations in the workplace;
- (c) Providing each employee with a copy of the Service provider's policy statement;
- (d) Notifying the employees in the Service provider's policy statement that as a condition of employment under this contract, employees shall abide by the terms of the policy statement and notifying the Service provider in writing within five days after any conviction for a violation by the employee of a criminal drug statute in the workplace;
- (e) Notifying the Commission within ten days of Service provider's receipt of a notice of a conviction of an employee; and,
- (f) Taking appropriate personnel action against an employee convicted of violating a criminal drug statute or requires such employee to participate in a drug abuse assistance or rehabilitation program.

**These certifications are a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction.**

---

Type Name and Title of Authorized Representative

---

Type Title

---

Signature

---

Date



**ATTACHMENT D**  
**TEXAS CORPORATE FRANCHISE TAX CERTIFICATION**

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Pursuant to Article 2.45, Texas Business Corporation Act, state agencies may not contract with For Profit Corporation that are delinquent in making state franchise tax payments. The following certification that the corporation entering into this contract is current in its franchise taxes must be signed by the individual on Form 203, Corporate Board of Directors Resolution, to sign the contract for the corporation.

---

The undersigned authorized representative of the corporation contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

Indicate the certification that applies to your corporation:

\_\_\_\_\_ The Corporation is a for-profit corporation and certifies that it is not delinquent in its franchise tax payments to the State of Texas.

\_\_\_\_\_ The Corporation is a non-profit corporation or is otherwise not subject to payment of franchise taxes to the State of Texas.

\_\_\_\_\_  
Type Name of Authorized Representative

\_\_\_\_\_  
Type Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ATTACHMENT E**  
**STATE ASSESSMENT CERTIFICATION**

The undersigned authorized representative of the corporation contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

The corporation certifies that:

- \_\_\_\_\_ It is current in Unemployment Insurance taxes, Payday and Child Labor law monetary obligations, and Proprietary School fees and assessments payable to the State of Texas.
- \_\_\_\_\_ It has no outstanding Unemployment Insurance overpayment balance payable to the State of Texas.

\_\_\_\_\_  
Type Name of Authorized Representative

\_\_\_\_\_  
Type Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## ATTACHMENT F

### Coastal Bend Workforce Development Board

#### DISCLOSURE OF INTEREST

It is the fiscal policy of the Workforce Solutions of the Coastal Bend ("the Board") that all persons or firms seeking to do business with the Board to provide the following information. Every question must be answered. If the question is not applicable, answer with "NA".

FIRM NAME: \_\_\_\_\_

P.O. BOX: \_\_\_\_\_ STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

FIRM IS:

☐ Corporation

☐ Partnership

☐ Sole Owner

☐ Association

☐ Other \_\_\_\_\_

#### DISCLOSURE QUESTIONS

**If additional space is necessary, please use the reverse side of this page or attach separate sheet.**

1. State the name of each "non-managerial employee" of the Board having an "ownership interest" constituting 5% or more of the ownership in the above named "firm" or who is an officer, director, employee, or consultant employed or associated with your organization:

<i><b>Name</b></i>

<b>Job Title and Section (if known)</b>

2. State the names of each "managerial employee" of the Board having an "ownership interest" constituting 5% or more of the ownership in the above named "firm" or who is an officer, director, employee, or consultant employed or associated with your organization:

<i><b>Name</b></i>

<b>Title</b>

3. State the names of each "board member" of the Board having an "ownership interest" constituting 5% or more of the ownership in the above named "firm" or who is an officer, director, employee, or consultant employed or associated with your organization:

<i><b>Name</b></i>

<b>Board, Commission, or Committee</b>

4. State the names of each employee or officer of a “consultant” of the Board who worked on any matter related to the subject of this contract and has an “ownership interest” constituting 5% or more of the ownership in the above named “firm” or is an officer, director, employee, or consultant employed or associated with your organization:

<b><i>Name</i></b>

<b>Consultant</b>

## **CERTIFICATE**

I certify that all information provided is true and correct as of the date of this Statement, that I have not knowingly withheld disclosure of any information request; and that supplemental statement will be promptly submitted to the Board, as changes occur.

\_\_\_\_\_  
*Certifying Person*

\_\_\_\_\_  
Title:

\_\_\_\_\_  
Signature of Certifying Person:

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

## ATTACHMENT G

### Coastal Bend Workforce Development Board

### UNDOCUMENTED WORKER CERTIFICATION

Effective September 1, 2007, HB 1196 amended Subtitle F, Title 10, of the Texas Government Code to add Subsection 2264. Chapter 2264 directs public agencies, state or local taxing jurisdictions, and economic development corporations (public entities) to require that any business submitting an application to receive public subsidies include in the application a statement certifying that the business, or branch, division or department of the business does not and will not knowingly employ an undocumented worker.

In the event that a business grantee is found in violation of 8U.S.C. subsection 1324a(f), consistent with the requirements of Texas Government Code subsection 2264, Boards are permitted to bring a civil action to recover any amounts owed, as well as court costs and reasonable attorney's fees.

Penalties incurred by business grantees shall be assessed damages at a rate of 20% of contract award. Said damages shall be made payable to the Board within 120 days of receiving the notice of violation.

#### DEFINITION OF TERMS

**Public Subsidy** – is broadly defined Texas Government Code §2264.001 (3) as a public program or public benefit or assistance of any type that is designed to stimulate the economic development of a corporation, industry, or sector of the state's economy or to create or retain jobs in Texas. The term includes, among other things, bonds, grants, loans, loan guarantees, benefits relating to an enterprise or empowerment zone, infrastructure development and improvements designed to principally benefit a single business or defined group of businesses, and matching funds. The Commission's Office of General Counsel has found that HB 1196 does not apply to the acquisition of goods and services.

**Undocumented Worker** – is defined as an individual who, at the time of employment, is not lawfully admitted for permanent residence in the United States or is not authorized under law to be employed in that manner in the United States.

#### CERTIFICATION

Contractor certifies that no undocumented workers will be employed during the execution of this contract. By the signature indicated below, the contractor verifies their understanding of the terms and conditions of this requirement.

---

Type Name of Certifying Person

---

Type Title

---

Signature of Certifying Person

---

Date

## ATTACHMENT H

### CUSTOMER RIGHTS AND COMPLAINT RESOLUTION PROCEDURE WORKFORCE SOLUTIONS OF THE COASTAL BEND

Participating in workforce services administered by the Texas Workforce Commission (Commission) or Workforce Solutions of the Coastal Bend (Board) grants you the right to file a complaint regarding your workforce services. These rights are guaranteed through the Commission's complaints, hearings and appeals procedures\* at 40 TAC, Chapter 823.

Please be aware that this complaint process does not pertain to matters alleging violations of nondiscrimination or equal opportunity requirements under the Workforce Innovations and Opportunity Act (WIOA) or matters governing job service related complaints.

#### **THE COMPLAINT PROCESS**

##### **What is a complaint?**

A complaint is a written statement alleging a violation of any law, regulation, or rule relating to any federal- or state-funded workforce service. If you have received an adverse action or want to file a formal complaint about workforce services you are first encouraged to discuss the adverse action or complaint with Texas Workforce Center staff where the complaint originated.

##### **Who may file a complaint?**

Texas Workforce Center customers – Individuals who have applied for or are eligible to receive federal- or state-funded workforce funded services administered by the Commission or the Board. These services include:

- Child Care Services
- Temporary Assistance for Needy Families (TANF) / CHOICES
- Supplemental Nutrition Assistance Program (SNAP) Employment & Training
- Workforce Innovations and Opportunity Act (WIOA) - Adult, Dislocated Worker, and Youth
- Eligible Training Providers receiving WIOA funds or other funds for training services.
- Other interested parties affected by the Texas workforce system, including subrecipients. These individuals may be child care or other service providers that have received a written statement issued by the Board, a Texas Workforce Center, or the Agency relating to an adverse action, or a provider or contractor, related to denial or termination of eligibility, under programs administered by the Agency or the Board.
- Previously employed individuals who believe they have been displaced by a Texas Workforce Center customer participating in work-based services such as subsidized employment, work experience, or workfare.

##### **How do I file a complaint?**

- Complaints must be in writing using the attached complaint form.
- Complaints must be filed within 180 days of the alleged violation.
- Complaints should be filed at the service level where the complaint originated for optimal and immediate satisfaction.

Board complaint procedures are available upon request.

##### **How will the complaint be resolved?**

- You will be given the opportunity for an informal resolution to resolve any disputes resulting from either a complaint or an appeal to a determination. An example of an informal resolution may include:
  - Meeting with your immediate case worker to seek a resolution;
  - Meeting with a Texas Workforce Center manager or designated Board staff for a more in-depth discussion related to the circumstances of the complaint and to discuss how the complaint may be resolved.

- If you are not satisfied with the outcome of the informal resolution, you have the right to file a complaint and to have the opportunity for a Board hearing with:

**Workforce Solutions of the Coastal Bend  
520 N. Staples  
Corpus Christi, Texas 78401**

- Once a complaint is filed with the Board, you will be notified in writing of a Board hearing at least (10) ten calendar days prior to the hearing date. The ten-day notice may be shortened with prior written consent of the parties involved.
- A Board decision will be issued within 60 calendar days from the date the complaint is originally filed.

If you do not agree with the decision issued by the Board or if no decision is mailed within 60 calendar days from the date the complaint was originally filed, you may file a written appeal to the Commission. The appeal must be sent within 14 calendar days after the mailing date of the Board's decision or 90 calendar days after the original filing date of the complaint. Appeals to the Commission are mailed to:

**Appeals, Texas Workforce Commission  
101 East 15th St., Room 410  
Austin, Texas 78778-0001**

By my signature below, I certify I have received a copy of the Workforce Customer Rights and Complaint Resolution Procedure.

\_\_\_\_\_  
Name of Authorized Representative

\_\_\_\_\_  
Date

**ATTACHMENT I**  
**OTHER ATTACHMENTS**



ATTACHMENT J

REFERENCES FORM

**REFERENCES/PAST EXPERIENCE – Maximum Points: 10**

Failure to provide and include the following information with your response by the submission date of the bid may result in disqualification from further consideration for an award resulting from this solicitation. Each reference will be contacted for evaluation purposes. Any reference that does not respond in the allotted time provided by the Board will result in a score of zero.

REFERENCE #1:

Company Name	
Contact Name	
Address, City, State, Zip	
Phone Number	
Fax Number	
E-Mail Address	
Types of Services Provided	
Contract Term (To/From) Dates	

REFERENCE #2:

Company Name	
Contact Name	
Address, City, State, Zip	
Phone Number	
Fax Number	
E-Mail Address	
Types of Services Provided	
Contract Term (To/From) Dates	

REFERENCE #3:

Company Name	
Contact Name	
Address, City, State, Zip	
Phone Number	
Fax Number	
E-Mail Address	
Types of Services Provided	
Contract Term (To/From) Dates	

REFERENCE #4:

Company Name	
Contact Name	
Address, City, State, Zip	
Phone Number	
Fax Number	
E-Mail Address	
Types of Services Provided	
Contract Term (To/From) Dates	

REFERENCE #5:

Company Name	
Contact Name	
Address, City, State, Zip	
Phone Number	
Fax Number	
E-Mail Address	
Types of Services Provided	
Contract Term (To/From) Dates	

**ATTACHMENT K**  
**PEER REVIEW**