

REQUEST FOR QUOTES (RFQ)



Issued by

WORKFORCE SOLUTIONS
of the Coastal Bend

For

COVID-19 Specific Short-Term Training

Applications to be submitted to the
Coastal Bend Workforce Development Board (d.b.a. Workforce Solutions of the Coastal Bend)
520 North Staples, Corpus Christi, Texas 78401 (if hand delivered)
P.O. Box 2568, Corpus Christi, Texas 78403 (if mailed)

Issue Date: June 29, 2020, 2:00 p.m. (CST)

Responses Due Date: July 10, 2020, 4:00 p.m. (CST)

Procurement is open and subject to the availability of funds.

A proud partner of the  network

Workforce Solutions of the Coastal Bend is an Equal Opportunity Employer/Program. Auxiliary aids and services are available upon request to individuals with disabilities. Relay Texas: 1-800-735-2989 (TDD) and 1-800-735-2988 or 7-1-1 (Voice). Historically Underutilized Businesses (HUB's) are encouraged to apply.

Important 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.

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PART 1.0 – GENERAL INFORMATION

1.1 Introduction

Workforce Solutions of the Coastal Bend (WFSCB) is a non-profit, tax-exempt organization that serves as the Workforce Board. WFSCB oversees workforce development programs in the eleven (11) county Coastal Bend region. As the grant recipient and administrative entity, WFSCB is responsible for the planning, evaluation and oversight of workforce related programs. WFSCB primarily receives funding from the United States Department of Labor through the Texas Workforce Commission (TWC).

The workforce board is supported by the board professionals, led by the Chief Executive Officer/President. WFSCB mission is to invest in the area's regional economic success through access to jobs, training, and employer services. To accomplish this mission the WFSCB has adopted the following strategies:

- Collaborate with industry, education, economic development and labor to develop a comprehensive regional workforce strategic plan;
- Develop a trainable and available workforce;
- Provide workforce-relevant educational and training opportunities for youth;
- Provide child care assistance to eligible families for employment and training activities.

1.2 Purpose of Request for Quotes (RFQ)

WFSCB is seeking quotes from qualified, professional organizations for short-term training services. Funding is made available through a grant received from the **Texas Workforce Commission COVID-19 Skills Development Funds**. See Section 1.4 for additional information on the services solicited.

The selected training providers will be considered from the responses received and approved. The training providers that are eligible under the RFQ and approved will be considered on an **as-needed-basis**.

1.3 Eligible Respondents

Individuals or organizations possessing the capacity and demonstrated ability to perform successfully under the terms and conditions of a contract with WFSCB may respond to this RFQ. Eligible training providers include public entities, community-based organizations, faith-based organizations, non-profit organizations, private for-profit corporations and other qualified training providers. Minority, disadvantaged, veteran and/or women-owned businesses are encouraged to respond to this RFQ.

Respondents to this RFQ must have **at least five (5) years of training experience** in the selected area.

1.4 Services Solicited

The impact of COVID-19 on the local economy has created an immediate need for direct services and training to employers and businesses to adhere to compliance with COVID-19 safety requirements. Training should focus on preparing employers/businesses to re-open, remain in business, or implement new methods to comply with COVID-19 at their worksite/workplace and with their workforce (employees). The job seeking labor force also requires pre-employment training related to knowledge concerning COVID-19 compliance at the workplace.

WFSCB is soliciting providers of COVID-19 short-term training services. Training must address the impact of COVID-19 on businesses, employers, employed workforce and the job seeking workforce. Training content must be specific and provide instruction in the following areas:

- How businesses will manage compliance under the new environment of COVID-19;
- How to provide business with training to enable the business to re-open their doors;
- How to provide safe working environment;
- Safety Protocol Training;
- Human Resources/Personnel Policy(ies) compliant with COVID-19;
- Re-hiring and/or re-training of their workforce in compliance with COVID-19;
- Business continuity planning to enable a business to remain open in compliance with COVID-19;
- Training on COVID-19 Guideline Compliance for job seekers, employed individuals and businesses;
- Required Occupational Safety and Health Administration related to COVID-19 compliance and mandatory training required.

The purpose of this RFQ is to compile a list of approved vendors of allowable training services that are less than 3 months in length and target individuals attached to a business (identified employer) or that have been furloughed and scheduled to come back to work. The list of approved vendors will be provided for use by WFSCB Career Centers. Those identified in need a short-term training service will be referred to the approved vendors for appropriate services as needed. The WFSCB Career center staff will follow the progress of the training recipient(s) throughout the activity.

PROGRAM REQUIREMENTS

Programs must not duplicate services which already exist within the Coastal Bend Workforce Development Area that are free of charge to the general public. If programs and services are available to the general public, the cost to the public must not be less than the cost charged to WFSCB. Training(s) will be on an individual basis and or cohorts. Training providers selected will provide a calendar of when short-term trainings are offered. The training may be offered in English and/or Spanish, upon request.

SERVICE OFFERINGS

- Short-term training is preferred however duration of training must be less than 3 months.
- Training locations- provide address of where training will be offered.
- Continuous Open Enrollment
- On-Line training serving multiple individuals is encouraged

Please provide a written response related to this request which specifically as outlined below:

Response to Scope of Work Short-Term Training Programs:

1. Describe how the short-term training will specifically prepare individuals for continued employment or new employment in compliance with COVID-19 employer and/or workplace requirements.
2. Describe how the short-term training will specifically prepare the employer and employer's workforce to meet compliance with COVID-19.
3. Describe for each short-term training the length of the course, e.g., weeks, months.
4. Provide for each short-term training a calendar of scheduled start and end dates.
5. Describe if the individuals will receive a certification of successful completion and if the document certifies or demonstrates the individual has attained the competency(ies) required to meet COVID-19 compliance.

Cost

Include the proposed cost for the short-term training. Ensure the cost is all inclusive, if necessary provide breakdown of each cost item. If necessary or helpful, you may provide a cost per individual enrolled. **Submit this information by completing Attachment C, on page 14.**

Demonstrated Performance

1. Provide a description of your business/school/entity.
2. Provide the name of and the number of trainings you have provided in the past two (2) years.
3. Provide three (3) references of businesses or organizations you have provided training for in the last two (2) years. Each reference must be three distinct entities. Include the references on Attachment F of the RFQ.

1.5 Subcontracting

Any subcontracting must be specified in the response and approval must be granted by the WFSCB prior to the execution of any contract resulting from this RFQ. All subcontracting is subject to applicable federal, state, and local laws, rules and regulations and policies. If the respondent proposes to subcontract any of the above services and activities to be provided, the respondent must indicate which services and activities will be subcontracted and the rationale behind using subcontractors instead of providing the services directly. The respondent must also describe how subcontractors were (or will be) procured and selected, their qualifications, as well as the basis for payments. Subcontractors are subject to the same requirements as the respondent under this RFQ and resultant contract.

PART 2.0 –CONTRACT INFORMATION

2.1 - Award Notification

The actual amount of a contract award will be based on the proposed cost, availability of funds, and the standards for the use of the funds (i.e., all costs must be reasonable and necessary to carry out the planned functions, allowable, and allocable to the proper grant/cost categories.)

2.2 - Contract Period and Renewals

Once your response is evaluated and approved, a contract for services will be executed once the respondent is contacted by WFSCB. This contract may be renewed for an additional one-year period. The contract renewal is at the discretion of the WFSCB and is based on need, satisfactory performance, availability of funds, and successful contract negotiations.

2.3 - Selection and Appeal Process

- I. All responses to the RFQ considered must be responsive to the RFQ instructions.
- II. WFSCB will base its selection on responsiveness to the RFQ, qualifications, experience, demonstrated ability/references, and cost.
- III. Any respondent receiving a score of less than “70” will be declared non-responsive.
- IV. WFSCB will make a good faith effort to award contracts to Historically Underutilized Businesses (HUB's).
- V. All respondents will receive notification of application status. An applicant who wishes to appeal the decision will be required to notify WFSCB Complaint Officer, in writing, within fifteen (15) days from the date of the notification letter. The complainant letter must specify the nature of the appeal and any desired remedies of action. WFSCB reserves the right to determine whether the appeal is valid and merits further consideration.

2.4- Insurance

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 does not have Workers Compensation insurance, but 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 obtained 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.

2.4 – Invoice for Payment

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

Submit your invoices(s) to the fiscal department at: fiscal@workforcesolutionscb.org

2.6 – Contract for Services

Unless otherwise noted, contract for services will be based on a cost-reimbursement basis. Costs will be paid based on the submittal of an invoice with all support documentation requested.

PART 3.0 – GOVERNING CONDITIONS AND LIMITATIONS

1. WFSCB reserves the right to accept or reject any or all applications submitted.
2. WFSCB is exempt by law from payment of Texas Sales Tax and Federal Excise Tax.
3. This RFQ does not commit WFSCB to pay for any cost incurred prior to the execution of any contract or payment agreement. All agreements are contingent upon availability of funds from the U.S. Department of Labor and/or Texas Workforce Commission.
4. The intent of this RFQ is to identify the various contract alternatives and estimates of costs for the items solicited. WFSCB is under no legal requirement to execute a contract or payment agreement from any application submitted.
5. Respondents shall not make offers of gratuities or favors, to any officer, employee, Board member of WFSCB, or any subcontractor employees of WFSCB. Contact for technical assistance is allowed with the RFQ contact person or designated WFSCB Board staff. Violation of this instruction will result in immediate rejection of the application.
6. WFSCB specifically reserves the right to vary the provisions set herein any time prior to the execution of the contract or payment agreement where such variance is deemed to be in the best interest of WFSCB.
7. All responses and their accompanying attachments will become property of the WFSCB after submission and materials will not be returned. In addition, all materials that are produced as a result of this RFQ become property of WFSCB.
8. The contents of a successful response may become contractual obligations, if a contract or payment agreement is awarded. Failure of the respondent to accept those obligations may result in the cancellation of the response for selection. The contents and requirements of this RFQ may be incorporated into any legally binding and duly negotiated contract between WFSCB and the selected applicant(s).
9. WFSCB reserves the right to select and/or contract with more than one applicant from the applications submitted.
10. Costs incurred by a contracted entity in the delivery of services shall be reimbursed based on mutually-agreed on conditions and delivery schedules with the submission of appropriate documentation. Delivered services must meet standards agreed upon during contract negotiation before reimbursement is made.

11. WFSCB 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 nondiscrimination and equal opportunity provisions as required by 29 CFR 38.2(1). Each application for financial assistance under Title I of Workforce Innovation and Opportunity Act (WIOA), as defined in §38.4, must include the following assurance:

As a condition to the award of financial assistance from the Department of Labor under Title I of WIOA, the grant applicant assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws:

Section 188 of the Workforce Innovation and Opportunity Act (WIOA), 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 WIOA Title I—financially assisted program or activity; Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis 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 applicant also assures that it will comply with 29 CFR part 38 and all other regulations implementing the laws listed above. This assurance applies to the grant applicant's operation of the WIOA Title I—financially assisted program or activity, and to all agreements the grant applicant makes to carry out the WIOA 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.

PART 4.0 – SUBMISSION INFORMATION

4.1 – Submission of Response

We encourage all interested respondents to submit their responses as soon as possible. WFSCB plans to start the evaluation process on July 13, 2020.

4.2 – Procurement Schedule*

RFQ Issue Date	June 29, 2020, 2:00 p.m. (CST)
Submission of Written Questions	July 3, 2020, 5:00 p.m. (CST)
Responses Due	July 10, 2020, 4:00 p.m. (CST)
Submission Address	Workforce Solutions of the Coastal Bend 520 North Staples St., Corpus Christi, TX 78401 (if hand-delivered or by private courier) P.O. Box 2568, Corpus Christi, TX 78403 (if mailed) RE: RFQ for Short-Term Training ATTN: Robert R. Ramirez, Contracts and Procurement Officer
Submission of Required Electronic Copy of Response Due	July 10, 2020, 4:00 p.m. (CST) via email to: robert.ramirez@workforcesolutionscb.org
Plan Contract Start Date	July 16, 2020

**Dates are subject to change. Entities requesting a copy of the RFQ will be notified in writing of any changes in the procurement schedule.*

5.0 – RESPONSE REQUIREMENTS

5.1 – Response Format

Responses must be type and completed on 8½” x 11” paper, with all pages sequentially numbered and bound. Each response must contain Attachments/Certifications A through G in the order as shown below. Please do not use less than a 12-point font

Response packages should be organized in the manner specified below:

- Responses should be prepared in a concise manner. Clarity of content and completeness are essential.
- A transmittal letter must be included on the individual's/firm's letterhead stationery.
- Use the Certification by Respondent form (Attachment A) of the RFQ as the cover sheet.
- Each response must include the Statement of Work response (Attachment B) of this RFQ.

5.2 – Number of Copies

Each respondent must submit an **ORIGINAL** with all executed (i.e. original signatures) forms and certificates and one (1) electronic copy of your response on flash drive for evaluation purposes. Any response lacking the required copies will be ruled unresponsive and will not be considered under this procurement. Any differences between the original and the electronic copy are at the liability of the respondent.

The original response must be marked “**ORIGINAL**” on the Cover Sheet and contain original signatures.

In order to expedite the review process, you may submit an additional PDF copy via e-mail to robert.ramirez@workforcesolutionscb.org. The electronic copy must indicate all signatures required.

5.3 – Order of Response Content

Responses following the format below, must be clearly labeled in the exact order shown below. Compile the response in the following order:

- **Transmittal Letter**
- **Attachment A** – Certification By Respondent
- **Attachment B** – Statement of Work/Your Response
- **Attachment C** – Cost Information
- **Attachment D** – Other Attachments (Other materials requested or referred to in the narrative should be labeled and included here, e.g., certifications, insurance. Additionally, if your firm is certified as a HUB by the State of Texas, please attach a copy of the certification.
- **Attachment E** – Listing of Prior Short-Term Trainings for Similar Services
- **Attachment F** – References Form
- **Attachment G** - Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters, and Drug-Free Workplace Requirements

PART 6.0 – EVALUATION AND SELECTION PROCESS

6.1 – Evaluation Process

WFSCB will evaluate responses received and select the individual/firm on the basis of the following criteria:
The WFSCB staff reviews the responses received to determine if they are responsive. For the responses to

be considered responsive and to be evaluated for selection, the following requirements must be met:

1. The responses must have been submitted prior to the RFQ's due date and time.
2. The one response must be label ORIGINAL must be complete with original signatures.
3. The responses must be for the specific services requested and described in the RFQ packet.
4. The responses must be submitted in the format described in the RFQ Packet.
5. One original (marked original) with all executed (i.e. original signatures) forms and certificates and one (1) electronic copy of your application on flash drive must be submitted. WFSCB will base its selection on Responsiveness to RFQ, Qualifications, Experience, Demonstrated Effectiveness/References, and Cost. Respondents may earned additional points if they are currently certified as a HUB (Historically Under-Utilized Business) by the State of Texas Comptroller of Public Accounts.

All responses will be screened for inclusion of all required information prior to release to the evaluation team. WFSCB may exclude from further consideration for contract award any non-responsive response.

WFSCB may use Board staff/members, independent evaluators or a combination of both to evaluate and rank proposals.

After evaluation, an award may be made on the basis of the evaluation and ranking, without discussion, clarification or modification, or the WFSCB may enter into negotiations with the highest ranked respondent. If the WFSCB is unable to reach agreement with the highest ranked respondent, the negotiations will terminate and negotiations will begin with the next respondent in the order of the ranking until a contract is reached or the Board has rejected all responses.

NOTE: After evaluation, any response with a total of 70 points will be considered as non-responsive and will be disqualified from further consideration. Responses receiving a final score of 70 or better are not guaranteed an award.

The WFSCB will make a good faith effort to award contracts to Historically Underutilized Businesses (HUBs).

6.2 – Application Evaluation Criteria

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

Responsiveness to RFQ (Value 10 points)

This criterion examines the extent to which the minimum requirements of the RFQ were met.

Qualifications (Value 20 points)

This criterion addresses the respondent's educational and training credentials.

Experience (Value 25 points)

This criterion examines the knowledge and skills of the respondent which have been derived from actual work experiences in presenting similar topics and the requirement of five (5) years of direct relevant prior experience.

Demonstrated Effectiveness/References (Value 20 points)

This criterion is a measure of the respondent's ability to deliver similar services. Check the list of three (3) distinct references familiar with respondent services. References will be verified.

Cost (Value 25 points)

This criterion evaluates the cost of the services to determine if they are within the market rate for such services. Also, costs will be evaluated for reasonableness.

HUB Value 5 points

Historically Under-Utilized Business (HUB) as certified by the State of Texas (applicant must provide current copy of the certification.)



WORKFORCE SOLUTIONS

of the Coastal Bend

ATTACHMENT A

CERTIFICATION BY RESPONDENT

RFQ FOR SHORT-TERM TRAINING SERVICES

A. Identification of Respondent:

Name of Organization/Individual: _____

Mailing Address: _____

Name of Contact Person Regarding this response: _____

Telephone Number: _____ E-Mail Address: _____

Fax Number: _____ Web Site: _____

B. Name and Title of Person Responsible for:

Contracting Authority: _____ / _____

Contract Negotiations: _____ / _____

Liaison to the WFSCB: _____ / _____

C. Description of Respondent (Legal/Tax status):

Private, for-profit: ☐
Public, non-profit: ☐
Private, non-profit: ☐

Corporation: ☐
Partnership: ☐
Sole Ownership: ☐
Government entity: ☐

State Comptroller ID # _____

Federal Tax ID # _____

D. Please check if your firm is a Historically Underutilized Business as defined by the Texas Government Code 407.101.

Yes ☐ (If "Yes" provide approved certification.) No ☐

Signature of person who can commit organization to this RFQ response:

Print or Typed Name of Representative

Print or Typed Title

Signature

Date

ATTACHMENT B

STATEMENT OF WORK/YOUR RESPONSE

(Please include your responses for information under "Statement of Work/Your Response", page 4. In responding to the request for information, please make sure each of your responses are numbered to correspond to the requests for information as referenced on page 4, under the sections entitled, "Response to Scope of Work Short-Term Programs" and "Demonstrated Performance".

ATTACHMENT C
COST INFORMATION

Name of Respondent: _____

Training Fee Per Person: \$ _____

Fee for Materials/Supplies: \$ _____

Other Fees : \$ _____

Other Cost Information (please specify):

ATTACHMENT D
OTHER ATTACHMENTS

ATTACHMENT E

LISTING OF PRIOR SHORT-TERM TRAININGS FOR SIMILAR SERVICES

On the following table, list the short-term trainings or services your organization has provided in the past two (2) years. Note: The table shown below may be reproduced, as needed, to provide the requested information.

Name of Organization	Title of Short-Term Trainings

ATTACHMENT F

REFERENCES FORM

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 (how many years provided services (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 (how many years provided services (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 (how many years provided services) (To/From) Dates	

ATTACHMENT G

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

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).

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 subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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).

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.

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).

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 Contractor'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 Contractor's policy statement;
- (d) Notifying the employees in the Contractor'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 Contractor 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 Contractor'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 require 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 of Authorized Representative

Type Title

Signature

Date