



STATE OF ARKANSAS

OFFICE OF STATE PROCUREMENT

1509 West 7th Street, Room 300
Little Rock, Arkansas 72201-4222

TECHNICAL PROPOSAL PACKET

SP-16-0215

PROJECT MANAGER

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification. *



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PROPOSAL SIGNATURE PAGE

Type or Print the following information.

RESPONDENT'S INFORMATION					
Company:					
Address:					
City:		State:		Zip Code:	
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit				
Minority Designation: <i>See Minority Business Policy</i>	<input type="checkbox"/> Not Applicable <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American <input type="checkbox"/> Service Disabled Veteran				
AR Minority Certification #: _____			Service Disabled Veteran Certification #: _____		

VENDOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:		Title:	
Phone:		Alternate Phone:	
Email:			

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with vendor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), shall be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

An official authorized to bind the vendor to a resultant contract must sign below.

The signature below signifies agreement that either of the following **shall** cause the vendor's proposal to be disqualified:

- Additional terms or conditions submitted in their proposal, whether submitted intentionally or inadvertently.
- Any exception that conflicts with a Requirement of this *Bid Solicitation*.

Authorized Signature: _____ Title: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTION 3 - VENDOR AGREEMENT AND COMPLIANCE
SERVICE PROVIDER ONLY

- *Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.*

Section 3 does not apply for the Project Manager response.

**SECTION 4 - VENDOR AGREEMENT AND COMPLIANCE FISCAL
INTERMEDIARY ONLY**

- *Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.*

Section 4 does not apply for the Project Manager response.

SECTION 5 - VENDOR AGREEMENT AND COMPLIANCE
PROJECT MANAGER ONLY

- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTIONS 6, 7, 8 - VENDOR AGREEMENT AND COMPLIANCE

- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____

Use Ink Only.

Printed/Typed Name: _____ Date: _____

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

VENDOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.**Type or Print the following information*

Subcontractor's Company Name	Street Address	City, State, ZIP

☐ **VENDOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.
- **Do not** include additional information if not pertinent to the itemized request.

	Maximum RAW Score Available
PROJECT MANAGER ONLY	
PM.1 ORGANIZATIONAL CAPACITY	
A. Provide a detailed description of the organization, services provided, and experience with Pay for Success.	5 points
B. Describe your capacity to dedicate full-time staff with relevant expertise to the project, including the ability to do so during the development of the Pay for Success contract with Arkansas's state government and other stakeholders without or with partial compensation.	5 points
PM.2 CAPACITY FOR MANAGING A PERFORMANCE-BASED PROGRAM	
A. Provide detail on your demonstrated ability to collect, monitor, analyze, and report outcome data and implement ongoing performance improvement.	5 points
B. Provide detail on your track record with performance-based management of service providers.	5 points
PM.3 PARTNERSHIP MANAGEMENT AND CAPACITY TO DEVELOP PAY FOR SUCCESS PROGRAM	
A. Detail any past work with governments, services providers, funders, and professional evaluators.	5 points
PM.4 PAST WORK WITH ARKANSAS/SIMILAR STATES	
A. Detail any past work with Arkansas's state government, Arkansas-based service providers, funders, or target population. If none, detail the same for similar states. Explain the nature of the project(s), the ultimate results/outcomes, and any other relevant details.	5 points
PM.5 NEGOTIATION EXPERIENCE	
A. Describe your ability to collaborate with and represent the interests of the government, the service provider, and the evaluator in a complex negotiation and achieve consensus on the Pay for Success contract deliverables. Use past experience for illustration.	5 points