PONCE LOCAL WORKFORCE DEVELOPMENT AREA PONCE LOCAL BOARD



PROPOSAL FORM FOR ONE-STOP OPERATOR PONCE COMPETITION

DO NOT WE	RITE IN THIS SPACE. FOR WIOA USE ONLY.	TYPE OF PROPOSAL
		(Indicate Service)
	Evaluation Date:	
Proposal	Administration Committee	
Registration	Evaluation Date:	
#	Proposal and Planning Committee (WDB)	
	Evaluation Date:	
	Executive Committee (WDB)	
	EvaluatiDate:	
	Special Local Board Committee	
TITLE OF THE PR	ROPOSAL:	
_		
ONE -STOP OPER	ATOR PONCE COMPETITION:	
IDENTIFICATION	OF APPLICANTS	
Name and Title o	f the Organization	
Name of Authoria	zed Representative	
Signature of Autl	norized Representative	
Name of Contact	Person	
Mailing Address		
Address		
Phone Number:	Fax:	
Email Address		

The content of the proposal for the selection of contractors of the One - Stop Operator is described as follows:

(The lined space provided is for format uniformity of the Proposal Forms. These can be erased to include text.)

I.	General	Informat	ion (An	pendix 1)
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 a. Applicant's Summary (Minimum two pages) 1. Describe the organizations' experience, history, services, and development from init implementation activities as well as the duration period operating in Puerto Rico. 		

b. Proposal Justification (Minimum three pages)

 Describe the project in general. Include a detailed narrative, justification and objectives. Describe the organization's experience and qualifications to service the One-Stop Operator of the CGU-AJC.

c.	Iministration (Minimum three pages) Describe the administrative capacity, the resources (resumes, certifications) and the day to day operation activities to obtain the objectives and goals of the organization efficiently and effectively.

 d. Experience in operating job and skill training programs (Minimum two pages) 1. Describe your experience in operating job and skill training programs in the educational sector.

Financial Management of Federal Funds (Minimum three pages) 1. Describe your previous experience managing WIOA funds and other federal (Provide details of federal funding.) 2. Describe how your organization will assume financial liability of CGU-AJC.	

f. Accreditations, Licensing and Institutional Permits1. Mention and include copies of accreditations, licenses and permits of your Institution.

		,	
NO.		INCLU	JDED
	ACCREDITATIONS, LICENCES AND PERMITS	Yes	No
1			
2			
3			
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7			
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10			

II. Services, Activities and Programs (Appendix 2)

a.	Description of the Design and Content of the Services (Minimum three pages.)	
	1. Describe the design and content of the services, activities and programs for displayouth and adults according to WIOA sec. 129 and 134.	aced

b.	Operational Structure for Management and Administration (Minimum four pages)
	1. Describe the operational structure for management and administration.
	Include an organizational chart of the management, administration and
	operational hierarchies. Also include a flowchart of the services.

 Mention the resources, methodology and service system available to operate the One Stop Center.

1. Design an infrastructure of the services (Minimum five pages) strategies to develop individual services, case management and follow-up services.

III. Development Plan and Compliance (Appendix 3)

1	fiv	e pages) Describe Stop Op Unificad	the Wor erator(lo 2016	rk Plan to Center in del Gob e	comply the Gov ernador.	with the green the green with the gr	goals and Joint St 99)	l objective ate Plan	d Objecti es establish for 2016	ned for th	ne One - <u>Estatal</u>

 b. Integration of Required and Optional Partnerships (Minimum three pages) 1. Capability of the respondents to actively integrate in the CGU the required and optional partners as established in WIOA sec. 121. 2. Describe the personnel training to become familiarized with all the services that partnerships offer (Cross training.) Present a schedule.

C.	(Minimum four pages)
	1. Capability of the respondents to comply with the criteria for certification and evaluation regarding effectiveness, physical access, and continuous program improvement as established in WIAO sec. 678.800, including norms for reasonable accommodation and access for the disabled.

d. Required Documents for Contracting:

- 1. Include a current up to date copy of the following documents:
 - 1. Certificate of the Department of State Incorporation Corporate Resolution
 - 2. Certificate of Good Standing- Department of State
 - 4. Current up-to-date Municipal Tax Patent
 - 5. PR Insurance Fund Corporation (FSE)
 - 6. Certificate of Unemployment and Disability Insurance- Department of State & Registration as Patron and Social Security Certificate for drivers
 - 7. Debt Certification Department of Treasury
 - 8. Certificate of Tax Return for last 5 years Department of Treasury
 - 9. Debt Certification of Municipal Revenue Collection Center CRIM
 - 10. Certification of Municipal Revenue Collection Center CRIM for last 5 years
 - 11. Negative Certification of Moveable Property and without Properties
 - 12. Public Responsibility Insurance endorsed to ALDL/ Ponce
 - 13. Certification of Compliance with ASUME (Justice Dept.)
 - 14. Sworn Affidavit according to Law # 428 -September 22, 2004
 - 15. Letter of Retention Relief Relay 7% (if applicable)
 - 16. Merchant Certification (IVU)
 - 17. Debt Certification (IVU)
 - 18. Certification of Filed Sales and Use Tax (IVU)
 - 19. Financial Statement certified by a CPA
 - 20. Employer Identification Number (EIN)
 - 21. Evidence of System for Award Management, (SAM-E)
 - 22. Evidence of Data Universal Numbering System, (DUN)

e. Certifications for the Signature of an Authorized Representative

(These will be provided by the Local Board)

- 1. Certification for Exclusion and Suspension
- 2. Certification for Lobbying
- 3. Certification for Billing regarding Absence of Interest by Staff Member and Public Employees

IV. Detailed Cost of the One- Stop Operator Center (Appendix 4)

1. Prepare a budget along with a narrative describing the budget costs. (Minimum two pages.)

(Please make sure your budget costs for the One Stop Operator Center are reasonable.)

V. Other Supporting Documents (Appendix 5)

Please mention and include other supporting documentation that the respondents esteem necessary.

NO.	NAME OF DOCUMENT	INCLUDED
	NAME OF DOCUMENT	YES NO
1		
2		
3		
4		
5		
6		

APPENDIXES

Certification Regarding

Department, Suspension and Other Responsibility Matters Primary Covered Transactions

Applica	nt Organ	nization			
Suspension	on, 29 CFI	is required by the regulat R Part 98, Section 98.510, Par 26, 1988 Federal <u>Register</u> (Pag	ticipant's Responsib		
		NG CERTIFICATION, R OF THE CERTIFICATION		INSTRUCTIONS	WHICH ARE AN
(1)	•	ospective primary participant d its principals:	;, (i.e. grantee) certifi	es to the best of its l	knowledge and belief,
	a)	Are not presently debarred voluntarily excluded from co			
	b)	Have not within a three-year judgment rendered agains connection with obtaining, Local) transaction or contrantitrust statues or commisdestruction of records, make	at them for commis attempting to obtain ract under a public ssion of embezzleme	ssion or fraud or a , or performing a pub transaction; violation ent, theft. Forgery, b	criminal offense in olic (Federal, State, or n of Federal or State ribery, falsification of
	c)	Are not presently indicted entity (Federal, State, or lo paragraph (1) (b) of this cert	ocal) with commission		
	d)	Have not within a three per transactions (Federal, State			nd one or more public
(2)		the prospective primary paration, such prospective partic	-		
		Name and Title	of Authorized Repre	sentative	
);	_		
	5	Signature			ate

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Loans and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, 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 a Member of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract of 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 in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form III, "Disclosure Form to Report Lobbying", in accordance with its instructions.
- (3) The undersigned shall require that the language of <u>this</u> 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.

This certification is 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 imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty or not less than \$10,000 and not more than \$100,000 for each such failure.

Authorized Signature	Date

Orden Ejecutiva Num. 1 Serie 2001-2002 Emitida por el Honorable Alcalde de Ponce

El 22 de febrero de 2002

CERTICACIÓN EN FACTURACIÓN SOBRE AUSENCIA DE INTERÉS POR FUNCIONARIOS Y EMPLEADOS PÚBLICOS

FECHA: de	d	le			
NOMBRE DEL SUPLIDOR	O PROVEEDOF	₹:			
NUM. DE FACTURA:	FECH	A: de _		de	
NUM. DE ORDEN DE COM	PRAS:	FECHA:	de	de	
"Bajo pena de nulida Autónomo de Ponce es del contrato o de la or en las ganancias o ben una dispensa previa. L del contrato u orden autorizado de la agen construcción han sido (según aplique) y no ha	parte o tien den de comp eficios prode a única cons de compro cia. El impo realizados,	ne algún inte ora objeto de ucto del con ideración pa a, ha sido rte de esta f los bienes h	erés en las g e esta factur etrato o de l era suminist el pago a factura es ju	ganancias o benera y de ser parte a orden de comp trar los bienes o cordado con el usto y correcto.	eficios producto o tener interés ra, ha mediado servicios objeto representanto Los trabajos de
	Firm	a del Suplido	r o Proveedo	or	
	 Seguro :	 Social Patron	al v/o Indivi	— dual	

Según se establece en el Boletín Administrativo Num. OE-2001-73 del 29 de noviembre de 2001 de la Gobernadora de Estado Libre Asociado de Puerto Rico, circulado por la OCAM mediante el Memorando Circular 2002-01 del 4 de enero de 2002 y en la Orden Ejecutiva Num. 2 Serie 2001-2002 del Alcalde de Ponce, la cual adopta ambas circulares: **SE PROHIBE EL PAGO DE FACTURAS QUE NO CONTENGAN ESTA CERTIFICACION.**