



Joseph H. Vicari, Freeholder Director
Gerry P. Little, Freeholder Deputy Director
John C. Bartlett, Jr., Freeholder
Virginia E. Haines, Freeholder
John P. Kelly, Freeholder

Michael J. Fiure, Director, Management & Budget
Jennifer L. Bowens, Purchasing Agent

**COUNTY OF OCEAN
ADMINISTRATION BUILDING
101 HOOPER AVENUE
TOMS RIVER, NEW JERSEY 08753**

COMPETITIVE CONTRACT

PROPOSAL

FOR

***WORK FIRST NEW JERSEY
WORK RELATED ACTIVITY PROVIDERS***

NOTICE OF COMPETITIVE CONTRACTING PROPOSAL
WORKFIRST NEW JERSEY WORK RELATED ACTIVITY PROVIDERS

The Ocean County Department of Human Services is seeking sealed proposals for WorkFirst New Jersey (WFNJ) Work Related Activity Providers to be funded through State allocations received by the Ocean County Local Workforce Development area as authorized through federal and state legislation.

The successful bidder will provide work related activities to recipients of public assistance under the provisions of the Workfirst New Jersey (WFNJ) grant program for the period October 1, 2017 – September 30, 2018, with a possible option of renewal for up to one (1) additional 12 month period, contingent upon the successful delivery of services and funding availability.

A Technical Assistance Meeting will be held on Wednesday, August 30, 2017 at 10:00am at the Ocean County Department of Human Services, 1027 Hooper Avenue, Building 2, 3rd Floor, Toms River, NJ 08754-2191. Questions about this solicitation must be submitted in writing no later than 4:00pm on Wednesday, August 30, 2017 to Daniel Leonard at DLeonard@co.ocean.nj.us and 732-506-5374.

Introduction

The Ocean County Department of Human Services is seeking proposals from interested organizations to provide work related activities to recipients of public assistance who are unable to obtain employment without additional services to achieve social and economic self-sufficiency. The purpose of the New Jersey Department of Labor and Workforce Development’s (LWD) Work First New Jersey Program is to provide to-work activities for recipients of Temporary Assistance to Needy Families (TANF), General Assistance (GA), and/or Supplemental Nutrition Assistance Program (SNAP), ensuring that public assistance is a short term transitional experience. The purpose of the Workforce Learning Link Program is to provide customers with a short-term computer delivered basic skills program to enhance their basic skills, build English language skills, learn basic computer skills, and improve their overall employability skills for career maintenance, enrichment, and advancement.

The One Stop Career Center offers job seeker services by providing career pathway employment plans through a combination of Federal, State, and local funding for workforce development. For many job seekers this may simply mean access to job listings, while others may require skill and aptitude evaluation, job search assistance, adult education, job training, postsecondary education or registered apprenticeship. Some may require temporary financial assistance, needs based payments, or supportive services. This solicitation seeks providers of supportive services and basic literacy skill building to work in coordination with the One Stop Career Center Administrative Entity to meet the needs of individuals receiving public assistance.

Services must be delivered in accordance with the priorities and strategies identified in Ocean County Workforce Development Board’s Local Area Plan, the WorkFirst New Jersey ‘To-Work’ Consolidation Plan, and all corresponding rules, regulations, directives, policies, and procedures.

Scope of Work

Successful bidder(s) will provide one or more of the following programs:

First Step to Employment Skills Development

- 8-12 week program
- An intensive assessment process, which will address all supported services needed to becoming life- and employment-ready. The assessment should include developing a plan of achievable goals, including aligning the client’s personal and career goals, with obtaining and sustaining self-sufficiency through unsubsidized

employment.

- Activities towards the achievement of a work readiness credential.
- Monitoring for individuals who have been sanctioned during their 10-day compliance period. During the compliance period, an intensive assessment process will address issues that caused the noncompliance. Upon completion of the compliance period, the One Stop Career Center Administrative Entity will determine if the participant will continue in the First Step program or be referred to another activity.
- All curriculum-based training provided in a classroom setting and any educational and occupational training must have the appropriate approvals to operate the training from the NJ Department of Labor and Workforce Development (LWD). Applications and renewals may be obtained on www.njtopps.com or contact njtopps@dol.nj.gov.

Next Steps to Employment Skills Development

- 20-26 week program
- Continued assessment process, addressing barrier to employment and self-sufficiency.
- Individualized case management.
- Short-term vocational education program leading to an industry-valued credential in the Health Care, Manufacturing, Technology or Leisure, Hospitality, and Retail industries.
- Internship/ CWEP/ work experience while attaining an industry-valued credential.
- Job search and job placement.
- For participants who are not able to complete a short term vocational education program and are receiving long term unemployment, have never held employment for any length of time, or have not been able to work due to multiple barriers, the service will also consist of:
 - o Intensive assessment and case management
 - o Intensive supportive services
 - o Intensive work readiness and life skills training
 - o Basic 1 or 2 task occupational skills training for an entry level position

Adult Basic Education (ABE) and/or English Language Acquisition (ELA) services

- Short term computer delivered basic skills programming to enhance basic skills, build English language skills, learn basic computer skills, and improve overall employability skills.
- Services should be targeted towards individuals who are at or above the sixth grade reading level and individuals who may already have a high school diploma or its equivalency.
- Services are expected to supplement and expand existing basic skills and literacy programs and are not intended to supplant other public funds such as the WIOA Title II Basic Skills Grant administered by the State.
- 30% of enrolled students must increase their EFLs based on an NRS approved assessment
- 60% must enter employment, enter postsecondary education or vocational training, or attain a High School Equivalent (HSE).

Any of the activities designed to serve special populations (i.e. individuals with language barriers, who have experienced homelessness, with mental health and/or substance use conditions) will receive particular consideration.

The participants to be served by the successful bidder for First and Next Steps program are required to be enrolled and participating in a State approved “To Work” activity. The participants will be deemed appropriate for “To Work” activity by the Ocean County Board of Social Services. The One Stop Career Center Administrative Entity will determine which specific services and activities should be provided to each participant based on their Individualized Employment Plan or Individualized Service Strategy.

For participants receiving Temporary Assistance to Needy Families (TANF), a minimum of 35 hours per week of activity is required and must be continuous with no breaks in services (defined as more than 2 unexcused absences in

a month). TANF clients that secure part-time employment must continue to participate in a supplemental activity to meet the required 35 hours per week of participation. The Work Related Activity Provider must coordinate with the One Stop Career Center Administrative Entity to ensure that participants are appropriately engaged in an activity, employment, or combination thereof. Participants who do not meet the 35 hour per week requirement will be sanctioned.

For participants receiving General Assistance (GA) and/or Supplemental Nutrition Assistance Program (SNAP), a minimum of 30 hours per week of activity is required and must be continuous with no breaks in services (defined as more than 2 unexcused absences in a month). GA and/or SNAP clients that secure part-time employment must continue to participate in a supplemental activity to meet the required 30 hours per week of participation. The Work Related Activity Provider must coordinate with the One Stop Career Center Administrative Entity to ensure that participants are appropriately engaged in an activity, employment, or combination thereof. Participants who do not meet the 30 hour per week requirement will be sanctioned.

For participants who are considered Able Bodied Adults Without Dependents (ABAWD), a minimum of 20 hours per week of activity is required and must be continuous with no breaks in services (defined as more than 2 unexcused absences in a month), coupled with 20 hours or less of employment. Of the 20-hour requirement, 10 hours per week must consist of a “To Work” activity and 10 hours must consist of supervised job search. The Work Related Activity Provider must coordinate with the One Stop Career Center Administrative Entity to ensure that participants are appropriately engaged in an activity and the job search is supervised.

Roles & Deliverables

- Upon referral from the One Stop Career Center Administrative Entity, engage and attempt to enroll all participants referred to the First Step, Next Steps to Employment, Adult Basic Education, and/or English Language Acquisition program
- Conduct the First Step, Next Steps to Employment, Adult Basic Education, and/or English Language Acquisition program according to applicable rules and regulations and the scope of work in this Request for Competitive Contracting
- Maintain appropriate accreditation for any curriculum based training activities
- Provide any and all data and reports required by County, State, and One Stop Career Center Administrative Entity, and maintain files and reports until audit
- Comply with any County, Regional, State and Federal program and financial monitoring
- Participate in One Stop Collaborative meetings and provide utilization and performance data as requested
- Participate in local and regional workforce planning efforts of the Ocean County local area
- Collect, analyze, and report performance data
- Maintain effective working relationships with One Stop partners, including the One Stop Career Center Administrative Entity
- Report to the Ocean County Workforce Development Board

Location

The successful bidder will be required to maintain a local office within the Local Workforce Development Area.

Eligible Applicants

Pursuant to the NJ Department of Labor and Workforce Development (LWD), eligible entities include:

- an institution of higher education or local education agency;
- a community-based organization, nonprofit organization, or faith based organization;

- a private for-profit entity;
- a government agency; and
- Another interested organization or entity, which may include a local chamber of commerce or other business organization, or a labor organization.

Applicants may be a consortium of private, public, and non-profit agencies and must be able to collaborate with the existing program structure to ensure timely delivery of all services. Preference will be given to these types of proposals. All consortium applicants must designate a lead agency who will be responsible for all programmatic and fiscal accountability of the complete program, its implementation, goals, objectives, case management, outcomes, performance measures, monitoring, and evaluation. Partner agencies in the consortium may have financial or non-financial agreements with the lead agency and will be held jointly responsible for their respective obligations under the agreement.

If a bidder is, or should be, aware of any potential conflict of interest, disclosure must be a part of the Certifications attached to this proposal. A conflict of interest would occur if members of the proposing organization whether as an employee, officer or director receives compensation or business for services rendered to Ocean County Workforce Development Board or have direct or consulting agreement, including those through family or business ties.

Bidders are prohibited from contacting or discussing this solicitation with board members of the Ocean County Workforce Development Board. Such contact and any attempts to sway decision making of the Board will result in disqualification of the bid.

Entities serving or seeking to serve multiple roles in the Ocean County Workforce Development area must adhere to WIOA Title 1, Subtitle E (Administration) and 679.430 to ensure appropriate firewalls within a single entity performing multiple functions to limit conflicts of interest and minimize fiscal risk. It is the responsibility of the bidder to recognize real or perceived conflicts of interest and plan to address them with appropriate firewalls. Such firewalls must be clearly articulated in the program narrative.

Funding Availability

Funding available for WorkFirst New Jersey Work Related Activity Providers will be based on the annual allocation of State workforce development funding to the Ocean County local Workforce Development area. Funding for each local area is determined through established funding formulas by the NJ Department of Labor and Workforce Development (LWD). It is understood that funds fluctuate from year to year.

For planning purposes, prospective bidders should understand that State funding to the Ocean County Local Workforce Development area for the PY2018 is in the amount of \$858,448.25 for WorkFirst NJ- Temporary Assistance to Needy Families (TANF), \$371,247.27 for WorkFirst NJ – General Assistance (GA), and \$119,838.00 for Workfirst NJ- GA/SNAP. It is estimated that 60% of the aforementioned grant programs – less 12% allowable Administration - will be dedicated to services by Work Related Activity Providers. In addition, State funding to the area for PY18 Workforce Learning Link is available in the amount of \$167,000. Less 7% administration, all Workforce Learning Link funds will be dedicated specifically to providers of Adult Basic Education and/or English Language Acquisition.

A total of \$867,863.70 is available for PY2018 to be awarded to one or more successful bidders. Neither funding availability nor Ocean County allocations are guaranteed in future contract periods.

Proposal Requirements

All proposals should include the following documents:

1. Program Narrative including with Program Chart
2. Computed Budget Proposal and Narrative
3. Certificate of Insurance
4. Current List of Board of Directors
5. Certified Audit
6. Copy of New Jersey Business Registration Certificate in compliance with N.J.S.A. 52:32-44 OR Copy of IRS letter granting tax exempt status under Sec. 501(c)3
7. Organizational Chart
8. Affirmative Action Regulations N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.) Compliance Statement
9. Disclosure of Investment Activities in Iran
10. Statement of Ownership in compliance with Chapter 33 of the laws of 1977
11. Non-Collusion Affidavit
12. References
13. Signature Page
14. Acknowledgment of receipt of addenda or revisions (if issued)
15. One (1) original and six (6) copies of proposal submission

Program Narrative Format

Please provide detail to the following items and questions.

Basic Agency Information

1. Include agency name, CEO or Executive Director's name, mailing and physical addresses, and main phone number, as well as the name, phone, and email address of the contact person for this proposal.
2. Provide the corporation type and, if applicable, documentation of Section 501(c) 3 tax exempt status.
3. Please include a brief Executive Summary that allows the reader to understand key aspects of the bidding entity and the approach to fulfilling the required functions.

Agency Background Information

1. Give the agency's mission statement and a brief history, including an overview of services currently provided by the agency.
2. Please outline all workforce programs operated during the last two years. Provide brief program descriptions, funding sources and performance information. If the organization has not provided past WorkFirst New Jersey employment, Workforce Investment Act (WIA), or Workforce Innovation and Opportunity Act (WIOA) programs, please outline programs that provided similar services in which your organization has been involved over the last two years.
3. Please describe your experience working in adult education. Specifically, in what capacity did you work and what results did you obtain.
4. Describe your organization's ability to meet the specific needs of public assistance recipients and/or English language learners, as applicable to the program categories proposed.

Description of Program

1. Tell us about the specifics of what you are offering as a service, which category(ies), and how your organization will generally fulfill the roles and deliverables described in this Request. Use the enclosed Program Chart to list and describe the service(s) and activity structure that will be followed in the provision of services.
2. Describe the behavior, knowledge, and skills that are expected to occur or be gained through the individual's participation in the program. Objectives must be measurable, attributable to the program, and related to the goals

of the funding source.

3. How many participants would be served in a year? Indicate daily program capacity and student/staff ratio.
4. Indicate type of enrollment cycle (closed cycle, rolling admission, etc.), times and days that the program will operate per week, and any organization closings (e.g. holidays) on which services will not be conducted.
5. Describe the methods that will be used to ensure participants meet planned goals within the target time frame. If the participant does not make satisfactory progress, what steps/ procedures will be in place to ensure achievement of satisfactory progress? Submit any forms used for tracking participant progress and reporting purposes.
6. Describe the procedure for re-engaging the customer who is participating appropriately.
7. Describe policies regarding participant sickness, tardiness, and/or other absences. Describe procedure for communicating with the One Stop Career Center Administrative Entity regarding customer absence. Include timeframe for notification.
8. Describe time and attendance procedures, detailing what form of attendance tracking and backup verification will be used. Describe method of using E-timesheets to track attendance for TANF participants and paper timesheets to track GA and SNAP participants. State the procedure for direct entry into an e-timesheet.
9. Describe policies regarding causes for termination, including but not limited to attendance and participation.
10. Describe in detail the activities that participants will be involved in during any self-directed component of their participation, how these activities will be monitored, and expected outcomes.
11. Describe your organization's ability to meet the specific needs of other special populations if applicable ((i.e. individuals with language barriers, who have experienced homelessness, with mental health and/or substance use conditions).
12. Indicate specific testing instrument(s) to be used to measure progress or levels mastered in the specific service(s) provided.
13. How will you measure participant performance and what performance benchmarks would be set for the program? How and why will the service achieve the results stated?
14. Describe the methods that will be used to assist participants in obtaining and retaining employment.
15. Describe any special strength or features that make your service different from similar offerings available, including any innovative approaches and best practices that will be utilized in providing these services.
16. Describe your knowledge of the most significant workforce development challenges and opportunities that the Ocean County local Workforce Development Area will likely face in the next two years.
17. Describe how your organization envisions its role and relationship with the One Stop Administrative Entity and the Ocean County Workforce Development Board.
18. If your organization is not presently a Work Related Activity Provider in the Ocean County local Workforce Development Area, describe how you will work with the current providers to prepare for an efficient transition. Please include a timeline that details the transition steps to be taken (i.e. staff hired, policies developed, etc.) and the anticipated completion date for each transitional activity.

Program Management

1. Provide resumes and/or job descriptions of all staff and positions relevant to this program. Describe their management authority and responsibilities. Be clear as to currently employed staff to be assigned to this program and new positions to be hired for assignment to this program.
2. If applicable, tell us about other members of the team that will support the Work Related Activity program, i.e. business partners, other educational partners from institutions of advanced learning, etc. How and why will these capabilities help achieve the results you are committed to achieving?
3. Provide a Table of Organization that illustrates the structure of the staff to be used in support of the Work Related Activity program within the larger agency structure. The organizational chart should list the percentage of dedicated time for all staff positions that are anticipated to work in support of the Work Related Activity program, the employee's date of hire, and the employee's annual salary.
4. Explain how you calculated the percent of time that each staff person will dedicate to the proposed program.
5. Describe the organization's internal controls that will be used for maintaining all records and documents (including participants). Identify how participant records will be kept and what will be included in those records.

6. Describe the systems that will be used to report programmatic and fiscal activities and how they will be used to exercise management control of the services and activities.
7. Explain how the appropriate customer data will be entered into the America's One Stop Operating System (AOSOS) and general reporting procedures to the One Stop Career Center Administrative Entity and Ocean County Workforce Development Board.
8. Describe how the proposed program will be internally monitored by the organization and the organization's process for continuous quality improvement. Attach questionnaires, staff surveys, or other forms that will be used.
9. Describe the methods that will be used to evaluate participant satisfaction. How will this information be used? Attach questionnaires, client satisfaction surveys, or other forms that will be employed.
10. Describe your plan for staff development to ensure that your staff are well-trained in the applicable rules, regulations, and best practices.
11. Any organization that has been selected or seeks to be designated to perform more than one function in the local Workforce Development area must clarify how the organization will carry out its responsibilities while demonstrating compliance with WIOA and corresponding regulations, relevant Office of Management and Budget circulars, and the State's conflict of interest policy. If applicable, describe in detail the firewalls that your organization will create between roles it seeks to play in the Ocean County Workforce Development area. Describe why the firewalls are deemed appropriate and how they will be enforced.
12. What evidence suggests that your organization has the capability and commitment to achieve the results stated above?

Computed Line Item Budget Proposal and Narrative Format

Submit the attached Line Item Budget Proposal for each program category applied for. Include a budget narrative to clarify and annotate the line item budget. When appropriate, calculate unit cost. Explain any in-kind contributions or match funds to be utilized. In-kind or matching funds are not required but will be considered favorably to maximize available resources.

Allowable costs include: salary and fringe for staff who provide program services directly to participants as well as first line supervisors and team leaders; goods or services for the use or benefit of the participants; equipment and material used in providing services to participants; insurance coverage for participants; information systems and data entry for the purposes of administering the program and providing services to participants.

A Technical Assistance Meeting will be held on Wednesday, August 30, 2017 at 10:00am at the Ocean County Department of Human Services, 1027 Hooper Avenue, Building 2, 3rd Floor, Toms River, NJ 08754-2191. Questions about this solicitation must be submitted in writing no later than 4:00pm on Wednesday, August 30, 2017 to Daniel Leonard at DLeonard@co.ocean.nj.us and 732-506-5374.

Proposal Submission Requirements

Sealed proposals will be received by the Department of Human Services located at 1027 Hooper Avenue, Building 2, 3rd Floor, Toms River, NJ 08754-2191 at which time said proposals will be recorded.

All proposals must be enclosed in a sealed envelope, containing one (1) original and six (6) copies of the Competitive Contract proposal, bearing the name and address of the proposer, the name of the proposal and the date of the opening on the outside of the envelope. All proposals must arrive at the Department of Human Services **no later than 4:00 pm on Thursday, September 14, 2017.**

The County will not be responsible for late mail deliveries and no proposals will be accepted if received after the time stipulated in the Competitive Contract proposal.

Evaluation Criteria

A review committee selected by the Ocean County Department of Human Services and Workforce Development Board will review and rank all responses. All proposals will be reviewed to determine if they conform to all the proposal requirements set forth and the following selection criteria will be used in award of a contract for the services described herein. ***Proposals must receive an average score of 67% to be considered for funding.*** The proposal that receives the highest average score will be recommended for funding to the Ocean County Workforce Development Board. Final funding decisions rest with the Ocean County Board of Chosen Freeholders, as the Chief Elected Officials for the local Workforce Development area.

Applicants have the right to appeal any action or decision related to this Competitive Contract RFP. Appeals will be reviewed and investigated by the Ocean County Workforce Development Board. The decision of the Board in such situations shall be final.

- 40 % - Technical Criteria**
- 40 % - Management Criteria**
- 20 % - Cost Criteria**

1. Technical Criteria:

- a. Does the bidder's proposal demonstrate a clear understanding of the scope of work and related objectives?
- b. Is the bidder's proposal complete and responsive to the specific requirements?
- c. Is there evidence to support the efficacy of the bidder's proposed methodology?
- d. Plan of Service – design and approach includes mandated services and measurable skills attainment goals, method of service delivery will enhance participants' job prospects and career opportunities, ability to use skills attainment formats in activities, innovative strategies, coordination with employer community.
- e. Partnerships and Coordination - Understanding of and commitment to an integrated service delivery model in the One Stop Career Center system and effective working relationships with the Board, partner organizations, businesses, and the community. Ability to leverage resources with other partners resulting in innovative service approaches will be considered.

2. Management Criteria:

- a. Organizational Stability, Background, Qualifications, Performance History – whether bidder adequately addressed all the response items and appears to be a solid organization and extent to which bidder demonstrated evidence of ability to perform the functions described in its project plan.
- b. Staffing Plan and Organizational Chart– completeness of response to the items in the instructions, quality of response, strength of experience, and demonstrated achievements/results.

3. Cost Criteria:

- a. How does the cost compare to other similarly scored proposals?
- b. Is the price and its component charges, fees, etc. adequately explained or documented?
- c. Reasonableness of pricing consistent with the plan of service proposed and the qualifications of bidder
- d. Ability to leverage resources with other partners resulting in innovative service approaches will be considered.

Ranking - All proposals will be reviewed for completeness and qualifications. The County of Ocean shall award a contract to the vendor or vendors that best meet the needs and interest of Ocean County. The County reserves the right to negotiate the terms and conditions of a contract with the successful vendor or vendors to obtain the most cost advantageous services for the County.

Indemnity Clause - The proposer, if awarded a contract, agrees to protect, defend and save harmless the County against any damage for payment for the use of any patented material process, article or device that may enter into the manufacture, construction or form a part of the work covered by either order or contract, and he further agrees to indemnify and save harmless the County from suits or actions of every nature and description brought against it, for, or on account of injuries or damages received or sustained by any party or parties by, or from any of the negligent acts of the contractor, his servants or agents.

Business Registration Certificate - A copy of the proposer's New Jersey Business Registration Certificate should be included with the submission. If it is not, it will be required prior to the award of contract. **Please see samples of acceptable Business Registration Certificates on page 11.**

Pay to Play Requirements - Starting in January 2007, all business entities are advised of their responsibility to file an annual disclosure statement of political contributions with the New Jersey Election Law Enforcement Commission (ELEC) pursuant to N.J.S.A. 19:44A-20.27 if they receive contracts in excess of \$50,000 from public entities in a calendar year. Business entities are responsible for determining if filing is necessary. Additional information on this requirement is available from ELEC at 888-313-3532 or at www.elec.state.nj.us.

Certification of Non-Involvement in Prohibited Activities in Iran - Pursuant to N.J.S.A. 52:32-58, the proposer must certify that neither the vendor, nor one of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e)(3)), is listed on the Department of the Treasury's List of Persons or Entities Engaging in Prohibited Investment Activities in Iran and that neither is involved in any of the investment activities set forth in N.J.S.A. 52:32-56(f). If the vendor is unable to so certify, the vendor shall provide a detailed and precise description of such activities.

Transitional Period - In the event services are terminated by contract expiration or by voluntary termination by either the Contractor or the County of Ocean, the Contractor shall continue all terms and conditions of said contract for a period not to exceed thirty (30) days at the County's request.

Statement of Ownership (Chapter 33 of the Laws of 1977) - The Attorney General has concluded that the provisions of N.J.S.A. 52:25-24.2, in referring to corporations and partnerships, are intended to apply to all forms of corporations and partnerships, including, but not limited to, limited partnerships, limited liability corporations, limited liability partnerships, and Subchapter S corporations.

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE		DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252
TAXPAYER NAME:		TRADE NAME:
TAXPAYER IDENTIFICATION#:		SEQUENCE NUMBER:
ADDRESS:		ISSUANCE DATE:
EFFECTIVE DATE:		<i>John S. Tully</i> Acting Director
FORM-BRC(08-01)	This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.	

THESE ARE SAMPLES OF THE **ONLY** ACCEPTABLE BUSINESS REGISTRATION CERTIFICATES.

ONE OF THESE DOCUMENTS MUST BE PROVIDED WITH THE PROPOSAL SUBMISSION OR PRIOR TO AWARD OF THE CONTRACT, REGARDLESS OF THE FACT THAT A COPY MAY ALREADY BE ON FILE WITH THE COUNTY OF OCEAN.

 STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE	
Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEBLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004
For Office Use Only:	
20041014112823533	

NON - COLLUSION AFFIDAVIT

STATE OF NEW JERSEY :

: ss

COUNTY OF _____ :

I, _____ of
the City of _____ In the County of _____
and the State of _____, of full age, being duly sworn
according to law on my oath depose and say that:

I am _____ of the firm of
_____ the vendor
making the Proposal for the above-named Project, and that I executed the said Proposal with
full authority so to do; that said vendor has not, directly or indirectly, entered into any agreement,
participated in any collusion, or otherwise taken any action in restraint of free, competitive
procurement in connection with the above-named Project; and that all statements contained in said
Proposal and in this affidavit are true and correct, and made with full knowledge that the
County of Ocean relies upon the truth of the statements contained in said Proposal and in the
statements contained in this affidavit in awarding the contract for the said Project.

I further warrant that no person or selling agency has been employed or retained to
solicit or secure such contract upon an agreement or understanding for a commission,
percentage, brokerage or contingent fee, except bona fide employees or bona fide established
commercial or selling agencies maintained by _____.
(N.J.S.A. 52:34-15). (Name of Contractor)

(Also type or print name of affiant under signature)

Subscribed and sworn to
before me this _____
day of _____, 20____.

Notary Public of
My commission expires

EXHIBIT A

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE

N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)

N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.**

AFFIRMATIVE ACTION QUESTIONNAIRE

NOTICE TO ALL CONTRACTORS

AFFIRMATIVE ACTION REGULATIONS N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.)

A. ACTIVITY OF YOUR COMPANY- Indicate below:

- Procurement and/or Service Company
- Professional Consultant
- Other _____

All Contractors, except Government Agencies, are required to comply with the above law.

B. TO ALL CONTRACTORS:

1. Within seven (7) days after receipt of the notification of intent to award the contract or receipt of the contract, whichever is sooner, a Contractor should present one of the following to the County of Ocean:
 - (a) An existing federally approved or sanctioned affirmative action program.
 - (b) A New Jersey Certificate of Employee Information Report Approval.
 - (c) If the Contractor cannot present "a" or "b", the Contractor is required to submit a completed Employee Information Report (Form AA302). This form will be made available to the Contractor by the County of Ocean.

C. QUESTIONS BELOW MUST BE ANSWERED BY ALL CONTRACTORS:

1. Do you have a Federally approved or sanctioned Affirmative Action Program?
Yes _____ No _____
 - (a) If yes, please submit a photocopy of such approval.
2. Do you have a State of New Jersey "Certificate of Employee Information Report" approval?
Yes _____ No _____
 - (a) If yes, please submit a photocopy of such certificate.

The undersigned Contractor certifies that he is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.) and agrees to furnish the required documentation pursuant to the law.

COMPANY: _____

SIGNATURE: _____

TITLE: _____

Note: A contract must be rejected as non-responsive if a contractor fails to comply with the requirements of N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.).

AMERICANS WITH DISABILITIES ACT

Equal Opportunity For Individuals With Disabilities

The CONTRACTOR and the COUNTY do hereby agree that the provisions of title II of the Americans with Disabilities Act of 1990 (the "Act") (42 U.S.C. 12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the COUNTY pursuant to this contract, the CONTRACTOR agrees that the performance shall be in strict compliance with the Act. In the event that the CONTRACTOR, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the CONTRACTOR shall defend the COUNTY in any action or administrative proceeding commenced pursuant to this Act. The CONTRACTOR shall indemnify, protect and save harmless the COUNTY, its agents, servants and employees from and against any and all suits, claims, losses, demands, or damages of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The CONTRACTOR shall, at its own expense, appear, defend and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the COUNTY'S grievance procedure, the CONTRACTOR agrees to abide by any decision of the COUNTY which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the COUNTY or if the COUNTY incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the CONTRACTOR shall satisfy and discharge the same at its own expense.

The COUNTY shall, as soon as practicable after a claim has been made against it, give written notice thereof to the CONTRACTOR along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the COUNTY or any of its agents, servants and employees, the COUNTY shall expeditiously forward or have forwarded to the CONTRACTOR every demand, complaint, notice, summons, pleading, or other process received by the COUNTY or its representatives.

It is expressly agreed and understood that any approval by the COUNTY of the services provided by the CONTRACTOR pursuant to this contract will not relieve the CONTRACTOR of the obligation to comply with the Act and to defend, indemnify, protect and save harmless the COUNTY pursuant to this paragraph.

It is further agreed and understood that the COUNTY assumes no obligation to indemnify or save harmless the CONTRACTOR, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the CONTRACTOR expressly understands and agrees that the provision of this indemnification clause shall in no way limit the CONTRACTOR'S obligations assumed in this Agreement, nor shall they be construed to relieve the CONTRACTOR from any liability, nor preclude the COUNTY from taking any other actions available to it under any other provisions of this Agreement or otherwise at law.

SIGNATURE PAGE

The County of Ocean does not discriminate on the basis of handicapped status in the admission or access to, or treatment, or employment in its programs or activities.

The County of Ocean shall allow access to any books, documents, papers and records of the contractor, which are directly pertinent to that specific contract.

Compliance is required with all applicable standards, orders, or requirements issued under 306 of the Clean Air Act, Section 508 of the Clean Water Act, Executive Order 11738 and Environmental Protection Agency Regulations (40 CRF, Part 15) which prohibits the use under non-exempt federal contracts, grants or loans of facilities included on the EPA list of violating facilities.

"The County of Ocean considers it to be a substantial conflict of interest for any company desiring to do business with the County to be owned, operated or managed by any County employee, nor shall any County personnel be employed by the vendor in conjunction with any work to be performed for or on behalf of the County of Ocean".

I HEREBY CERTIFY COMPLIANCE WITH THE FOREGOING.

Partnership

The undersigned is a Corporation under the law of the State

Individual

of _____, having principal offices
at _____.

NAME OF COMPANY, CORPORATION OR INDIVIDUAL
- PLEASE PRINT -

SIGNED BY: _____

PRINT NAME AND OFFICIAL TITLE

ADDRESS: _____

INCLUDE ZIP CODE

TELEPHONE: _____

E-MAIL ADDRESS _____

FEDERAL IDENTIFICATION NO. _____

STATEMENT OF OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: _____

Organization Address: _____

PART I - Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

PART II

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**
- OR**
- No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

PART III - Disclosure of 10% or Greater Ownership in the Stockholders, Partners or LLC Members Listed in PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

PART IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the County of Ocean is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the County of Ocean to notify the County of Ocean in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the County of Ocean to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Title:
Signature:	Date:

DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

PART 1: CERTIFICATION

PROPOSERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX

FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE

Pursuant to Public Law 2012, c. 25, any person or entity that submits a proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Proposers **must** review this list prior to completing the below certification. **Failure to complete the certification will render a vendor's proposal non-responsive.** If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

PLEASE CHECK THE APPROPRIATE BOX:

I certify, pursuant to Public Law 2012, c. 25, that neither the vendor listed below nor any of the vendor's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed below, or I am an officer or representative of the entity listed below and am authorized to make this certification on its behalf. **I will skip Part 2 and sign and complete the Certification below.**

OR

I am unable to certify as above because the vendor and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. **I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the certification below.** Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

You must provide a detailed, accurate and precise description of the activities of the vendor's person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.

PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, PLEASE ADD AN ADDITIONAL SHEET(S) OF PAPER.

Name _____	Relationship to Proposer _____
Description of Activities _____ _____	
Duration of Engagement _____	Anticipated Cessation Date _____
Proposer Contact Name _____	Contact Phone Number _____

Certification: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the County of Ocean is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the County to notify the County in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the County of Ocean and that the County at its option may declare any contract(s) resulting from this certification void and unenforceable.

Name of Proposer: _____

Full Name (Print): _____ Signature: _____

Title: _____ Date: _____

DOCUMENT CHECKLIST

Project Title: WORK FIRST NEW JERSEY WORK RELATED ACTIVITY PROVIDERS

<u>Required with proposal</u>		<u>Items submitted</u> <u>(Proposer's INITIALS)</u>
↓		↓
	A. FAILURE TO SUBMIT ANY OF THESE DOCUMENTS IS <u>MANDATORY CAUSE FOR REJECTION OF PROPOSAL.</u>	
<u>X</u>	Statement of Ownership (Chapter 33 of the Laws of 1977)	_____
<u>X</u>	Acknowledgment of receipt of addenda or revisions (if issued)	_____
<u>X</u>	Disclosure of Investment Activities in Iran	_____

	B. FAILURE TO SUBMIT ANY OF THESE DOCUMENTS MAY BE CAUSE FOR REJECTION OF PROPOSAL.	
<u>X</u>	Non-Collusion Affidavit	_____
<u>X</u>	Affirmative Action questionnaire	_____
<u>X</u>	Signature Page	_____
<u>X</u>	Copy of New Jersey Business Registration Certificate in compliance with N.J.S.A. 52:32-44 <u>OR</u> Copy of IRS letter granting tax exempt status under Sec. 501(c)3	_____
<u>X</u>	Program Narrative including Program Chart	_____
<u>X</u>	References	_____
<u>X</u>	Organizational Chart	_____
<u>X</u>	Certified Audit	_____
<u>X</u>	Certificate of Insurance	_____
<u>X</u>	Current List of Board of Directors	_____
<u>X</u>	Computed Budget Proposal and Narrative	_____
<u>X</u>	One (1) original and six (6) copies of proposal submission	_____

	C. DOCUMENTS THAT MAY BE INCLUDED WITH THE PROPOSAL.	
_____	Copy of Proposer's & Named Contractor's Public Works Contractor Registration Certificate(s)	_____

**D. THE UNDERSIGNED PROPOSER HEREWITH SUBMITS
THE ABOVE REQUIRED DOCUMENTS.**

PRINT NAME OF PROPOSER: _____

SIGNED BY: _____

PRINT NAME AND TITLE: _____

DATE: _____

**THIS CHECKLIST SHOULD BE INITIALED AND SIGNED WHERE
INDICATED AND RETURNED WITH ALL DOCUMENTS.**

ADDENDUM ACKNOWLEDGMENT

COUNTY OF OCEAN

ADDENDUM NO: _____

ADDENDUM NO: _____

ADDENDUM NO: _____

ACKNOWLEDGMENT

PROJECT ENTITLED: _____

Acknowledgment is hereby made of the receipt of Addendum No. _____ containing information for the above referenced project.

PROPOSER: _____

BY: _____

SIGNATURE: _____

TITLE: _____

DATE: _____

NOTE: WHEN AN ADDENDUM IS ISSUED, THIS ACKNOWLEDGMENT MUST BE ENCLOSED WITH THE PROPOSAL AT THE TIME OF PROPOSAL SUBMISSION. FAILURE TO DO SO WILL RESULT IN PROPOSAL REJECTION.

COMPUTED LINE ITEM BUDGET PROPOSAL

Program Category: __ First Steps __ Next Steps __ ABE __ ELA

Category	Line Item(s)	Calculation	Annual Amount
Personnel	Staff Salary and Fringe Benefits		
Consultants and Professional Fees	Travel, Staff Development		
Materials and Supplies	Equipment, Computer Software, Office Supplies, Printing and Copying Postage/Courier Service		
Facility Costs	Rent		
Specific Assistance to Clients	Educational Materials		
Other			
	TOTAL OPERATING COSTS		
Revenue	Client fees, reimbursement, in kind contributions, match funds		
	NET OPERATING COSTS		

Include separate Budget Proposals for each program category that is applied for (i.e. First Step, Next Steps, Adult Basic Education, English Language Acquisition).

LEVEL OF SERVICE

Number of participants to be served annually: _____

Number of participants daily: Average _____ Minimum _____ Maximum _____

UNIT COST

Indicate cost per unit of service. Clearly define the unit of service.

BUGET NARRATIVE

Include Budget Narrative that provides the detail of each line item.

PROGRAM CHART

Identify major units of instruction and hours for each. Include the service provided, expected dates that the activity will be provided, the length of time planned for the activity and expected outcomes for each activity. Include activities provide by other community organizations (i.e. field trips, guest experts, self-directed activities). The program chart should be designed in daily modules. Include as much detail as possible and attach additional sheets as necessary. *Include a program chart for each program category that is applied for.*

Program Category:	First Steps	Next Steps	ABE ELA
Service/ Activity	Timeframe Hours per week and duration of service	Description of Service/ Activity Scope of work, including specific skills that will be learned	Expected Outcomes/ Goals Specific measurable outcomes for each service/ activity and the process to evaluate if the desired outcome is reached