

STATE OF ARKANSAS

OFFICE OF PROCUREMENT ARKANSAS DEPARTMENT OF HUMAN SERVICES 700 Main Street Little Rock, Arkansas 72203

RESPONSE PACKET 710-20-0016R

CAUTION TO VENDOR

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

SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION							
Company:							
Address:							
City:				State:		Zip Code:	
Business Designation <i>:</i>	☐ Individual☐ Partnership	□ Sole Pro □ Corpora	prietorship tion				
Minority and Women-Owned	☐ Not Applicable☐ African American	 ☐ American Indian ☐ Hispanic American 	□ Asian American □ Pacific Islander American		☐ Service Disabled Veteran ☐ Women-Owned		
Designation* <i>:</i>	AR Certification #:		* See Min	ority and	Women-Ou	vned Business I	Policy

PROSPECTIVE CONTRACTOR CONTACT INFORMATION Provide contact information to be used for bid solicitation related matters.					
Contact Person:		Title:			
Phone:		Alternate Phone:			
Email:					

CONFIRMATION OF REDACTED COPY

□ YES, a redacted copy of submission documents is enclosed.

□ 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.

Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.

ILLEGAL IMMIGRANT CONFIRMATION

By signing and submitting a response to this *Bid Solicitation*, a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION

By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.

□ Prospective Contractor does not and will not boycott Israel.

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

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature:

Use Ink Only.

Title:

Printed/Typed Name:

Date:

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> **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. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> **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. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

SECTION 3,4,5 - 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. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

PROPOSED SUBCONTRACTORS FORM

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

PROSPECTIVE CONTRACTOR 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

□ PROSPECTIVE CONTRACTOR 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.

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

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
E.′	MINIMUM QUALIFICATIONS	
A.	Provide your Emergency Residential Childcare License obtained from the Child Care Facility Review Board.	5 points
В.	Describe your experience in providing the specialized services mentioned in the Scope of Work.	5 points
C.	Give address of and describe your physical location.	5 points
E.2	2 APPROACH TO SCOPE OF WORK	
A.	Describe your intake process for admitting clients on an emergency basis.	5 points
В.	Describe your plan to train staff to provide specialized services.	5 points
C.	Give detailed description of your staff level of training in working with children and youth with disabilities. Submit resumes, certificates, and licenses (if applicable).	5 points
D.	Describe how you will ensure the availability of staff and services twenty-four (24) hours a day seven (7) days a week.	5 points
E.	Describe Bidder's approach to providing services to the Developmental Disability population in a separate building from any other placement programs Bidder may operate.	5 points
F.	Describe how vendor's facility has the ability to accept either gender.	5 points
G.	Explain how you will work with DCFS in regard to accepting referrals and completing DDS waiver applications.	5 points