



**REQUEST FOR PROPOSALS**  
**FOR**  
**Displaced Homemaker Program**  
**Camden, Cape May, Mercer, Salem, Somerset**  
**Counties**

**Funding of \$750,000 Available**

**There will be no Bidders Conference for this RFP.**

**Questions are due March 20, 2019 by 12 Noon**

**Bids are due: April 17, 2019**

Christine Norbut Beyer, MSW  
Commissioner

March 1, 2019

## TABLE OF CONTENTS

### Section I - General Information

A. Purpose	Page 1
B. Background	Page 1
C. Target Population/Admission Criteria	Page 2
D. Applicant Staffing/Administration/Resources	Page 4
E. Funded Services	Page 5
F. Reporting Requirements	Page 9
G. Funding Information	Page 10
H. Applicant Eligibility Requirements	Page 10
I. RFP Schedule	Page 11
J. RFP Review Process	Page 12
K. Appeals	Page 14
L. Post Award Review	Page 15
M. Post Award Requirements	Page 15

### Section II - Application Instructions

A. Review Criteria	Page 16
B. Supporting Documents	Page 20
C. Requests for Information and Clarification	Page 27

Exhibit A–The State Affirmative Action Policy  
Exhibit B–Anti-Discrimination Provisions  
Exhibit C–DCF Budget Form  
Attachment 1–DH Logic Model  
Attachment 2–The Displaced Homemaker Act  
Attachment 3–Attestation

**Funding Agency**

State of New Jersey  
Department of Children and Families  
50 East State Street,  
Trenton, New Jersey 08625

**Special Notice:**

There will be no Bidders Conference for this RFP. Questions will be accepted in advance via email to [DCF.ASKRFP@dcf.nj.gov](mailto:DCF.ASKRFP@dcf.nj.gov) until **March 20, 2019** by 12PM. Technical inquiries about forms and other documents may be requested anytime.

**Section I – General Information**

**A. Purpose**

The New Jersey Department of Children and Families’ (DCF) Division on Women (DOW) announces the availability of \$750,000 total to establish one Displaced Homemaker (DH) Program in each of the following five (5) New Jersey counties: Camden, Cape May, Mercer, Salem, Somerset. It is expected that there will be up to five (5) awards of \$150,000 each. Applicants must submit a proposal for each county they intend to provide a program in as part of the application process.

Displaced Homemaker Programs provide participants with the support they need to pursue economic self-sufficiency. Programs are designed to enhance individual employability and earning potential and to increase the quality of participants’ lives and their families’.

The Displaced Homemaker Programs will provide outreach, intake and orientation, supportive group counseling, assessment and testing, career and educational programs, computer training, life skills development, skills training, pre-employment preparation, supportive services, referrals and job placement assistance. DCF will establish appropriate performance metrics to inform service delivery, enhance program management and support the seamless, coordinated delivery of services by all DH Programs. The Logic Model for the program is attached as Attachment 1.

**B. Background**

In 1979 the New Jersey Displaced Homemakers Act was signed into law to establish programs that assist individuals who have lost their primary source

of income due to divorce, separation, death or disability of a spouse, and who must obtain or upgrade their skills for transition into the paid job market. They may come from a wide range of gender, age, ethnic and socio-economic backgrounds. It is important to note that although participants of Displaced Homemaker programs historically have primarily been women, DOW and its contracted entities serve all eligible individuals.

The programs, with their varied services, are designed to improve the employability and earnings of participants and to enhance their quality of life and that of their families. Program Directors/Coordinators draw on a wide range of contacts in their cities and counties to help individuals find the assistance they need.

Displaced Homemakers often confront barriers to economic self-sufficiency. Many may be experiencing trauma and/or loss. In addition, they may struggle to find affordable child care, housing assistance, or accessible healthcare. They may need new job skills or advanced education to compete in the labor market. They may be confronted with other obstacles such as: restrictive family and medical leave policies, inadequate or inaccessible public/private transportation, literacy, language barriers, lack of job readiness and counseling programs, or lack clothes for work. With the current funding, DOW focuses on three major barriers; childcare, transportation, and education options. Short-term education or training that lead to an industry-recognized credentials can increase participants' likelihood of attaining employment or increased pay, which can lead to economic self-sufficiency.

Currently, there are 17 programs in 16 counties. All funding is subject to the appropriation of sufficient funds and the availability of sufficient resources.

### **C. Target Population /Admission Criteria**

With a total budget of \$750,000, one Displaced Homemaker Program will be funded in each of the following New Jersey counties: Camden, Cape May, Mercer, Salem, Somerset. Each awarded program shall receive up to \$150,000.

A Displaced Homemaker, as defined in Public Law 1979, Chapter 125 "Displaced Homemaker Act," is an individual who has not worked in the labor force for a substantial number of years but who has, during those years, worked in the home providing unpaid services for family members and has been dependent upon the income of another family member, but is no longer supported by that income, and:

- Is receiving public assistance because of dependent children in the home but is within one year of no longer being eligible for such assistance; or

- Is unemployed or underemployed and is having trouble in obtaining or upgrading employment; or
- Is at least 40 years of age, an age at which discrimination based on age is likely and at which entry or reentry to or advancement in the labor market is difficult.

A participant must meet these eligibility criteria as delineated in P.L. 1979, (c, 125 52:27D-43.18 et seq.) prior to participating in any services.

A Displaced Homemaker Intake must be completed for every participant. Eligibility is determined during the participant intake.

An **active participant** is defined as one who is enrolled and actively participating in program activities during the current fiscal year.

An individual/applicant is considered a **participant** when, after the Intake/Assessment session, it is determined that s/he is eligible for training, educational, employment and other related services offered by the program and is enrolled as such.

If an applicant is found to be ineligible:

- Please ensure that the applicant receives referrals to the appropriate community provider.

For eligible participants:

A comprehensive assessment will be conducted. Typically, the minimum time for intake is one hour. On-going case management sessions will vary in duration based on specific needs of participants.

An intake session will be provided by a staff member to include:

- Explanation of intake/assessment process and criteria for enrollment to services. This will include baseline employment Hope Scale and Self-Sufficiency matrix.
- Frequency and duration of case management sessions to be administered based on participant needs.
- How the participant's progress will be measured and shared with participant.
- Goal setting based on information gathered (interview and assessment tools). The focus of the long-term goal should be economic self-sufficiency; the objectives should be small steps which lead toward that goal.

Provide all participants with on-going individual case management session(s) to include:

- Re-assessment of the Self Sufficiency Matrix and Hope Scale, in addition to the assessment via any other education and vocation assessments, as appropriate.
- An interim follow-up date at the time of goal setting based on the participant needs. The date should occur after the participant receives some services and could be expected to achieve some short-term outcomes.
- Sessions that include a discussion of all other services available on and off-site. This includes referrals, support services, and follow-up services.

#### **D. Applicant Staffing/Administration/Resources**

Displaced Homemaker Program staff selection should reflect the community to be served. A strong applicant will demonstrate knowledge of the county demographic makeup, including language, and ensure that displaced homemakers can easily communicate with program/professional staff in their primary language.

Services must be available to all eligible participants in each catchment area. These include but are not limited to public transportation, use of bus pass/train pass, Uber/Lyft, a satellite location.

Required staffing shall be at least 1 full-time Case Manager and 1 part-time staff person. A minimum of a bachelor's degree in a social science field (social work, psychology, etc.) and experience in working with adults entering or returning to the paid labor market, shall be required.

#### **Cultural Competency:**

The applicant shall have policies and procedures that foster an inclusive environment to all cultures. These overarching policies shall include, but are not limited to the following:

- Providing cultural diversity training, in addition to knowledge and skill-building training, about specific populations;
- Ensuring diverse representation among board members, staff and volunteers through the development and implementation of a cultural diversity plan; and
- Developing outreach strategies with input from the community being served to engage under-represented, underserved and at-risk populations.

#### **Trauma-Informed Approach:**

The applicant will utilize a trauma-informed approach in its services that incorporates an understanding of the pervasiveness of trauma and its impact

on every aspect of service provision. Not all clients will experience violence in the same way, and each survivor will have individual needs. Being trauma-informed requires programs to understand and respond with sensitivity to the culture, behaviors, attitudes and emotional needs of survivors.

Participants' access to service: There are many hurdles that individuals must overcome to secure livable-wage employment, only one of which is the high price of education. Clients may be aware of what training, certification, or degree program they need to secure a more sustainable career, but there are often complex situations that prevent the client from finishing that education on their own. Childcare, transportation, the immediate costs of living, debt, confusion over application and loan forms, and other issues can make the task of returning to school seem impossible. These issues must be addressed, and appropriate services incorporated that remove these barriers. The displaced homemaker programs allow, through funding, the opportunity to attend short-term certificate training, transportation while in training, childcare while attending classes and the other costs associated with earning the certificate. These services should be easily accessible via the provider or shared partners and collaboration of services, or through multiple locations where services are provided.

All participant information will be captured using a web-based data management system provided by DCF. Each program will receive user log-ins at no additional cost. This system will also be the avenue for data collection and level of service information.

Providers will be required to attend all technical assistance opportunities provided by the Division on Women.

Hours of operation shall be accessible to the target population. A strong applicant will demonstrate ability to offer services beyond the traditional work week/hours.

The applicant shall have appropriate practices and policies for responding to different cultures, ethnic backgrounds, sexual orientations and gender identities.

## **E. Funded Services**

The following services shall be available within sixty (60) days of a signed contract document. Extensions may be requested in writing to the Director of the Division on Women.

**The following Standards are consistent with legislation P.L. 1979 (c.125, 52:27D-43.20 et. seq). (See Attachment 2-The Displaced Homemaker Act)**

Standard 1: Job counseling, job training, and job placements:

The long-term goal for displaced homemakers is economic self-sufficiency; the objectives should be small steps that lead toward that goal. At a minimum the following shall be made available:

- Computer literacy training programs and Internet access. Ideally, the computer lab should be on-site. Where this is not possible, partnerships with other community providers are strongly encouraged.
- Free Internet access to support computer literacy training skills and facilitate the interaction with the program.
- Computer literacy training classes includes topics such as basic computer literacy, Internet, Microsoft Office, Microsoft Word, Excel, Power Point.
- Counseling session tools that include interest/ability testing.
- Access to the Dictionary of Occupational Titles, Occupational Outlook Handbook, Guide to Top Labor Demand occupations in New Jersey and other relevant career exploration resources.
- A minimum of (1) structured career and job readiness classroom series. This may include, but is not limited to, Adkins Life Skills and/or GOALS listing the topics to be offered.
- Opportunities to develop interviewing skills, write or update resumes, and build social media profiles such as through LinkedIn.
- Help to identify local job opportunities and growing industries by consulting with the area Workforce Investment Boards (WIBs) and the NJ Department of Labor and Workforce Development, employment and training programs.
- Training and placement services to foster the development of partnerships with industry.

**Please Note:** 100% of displaced homemakers who participate in the job readiness series will take part in goal setting and career planning.



## Standard 2: Health education and counseling services

- Workshops and trainings shall include such topics as self-development, empowerment, self-esteem as well as alcohol and substance use.
- Referral systems shall be available to mental health facilities/programs, domestic violence shelters and services, clinics and/or Planned Parenthood, and assistance with finding programs in the community that also may provide health support and other types of counseling.

## Standard 3: Financial management services

- Workshops, mini-series or training that provide information and assistance with respect to credit, housing, and all other financial matters that may be identified as participant needs.
- Partnerships or collaborations with local banking and financial services for workshops and information are required.
- Financial Literacy classes or support, including how to balance a check book, open a savings account or create a budget should be offered. Many DH participants may not have had the need to employ these skills in their past, and yet they are critical for planning ahead, staying out of debt and establishing good credit. While some classes, such as estate planning, mortgage and loans, or insurance, may require seasoned professionals, other basic courses about balancing checkbooks and tracking expenses can be offered by local leaders that have achieved financial independence and successfully taken control of their finances.

## Standard 4: Education Services

Funding allows for making decisions around education grants for participants of the program.

- Six (6) minimum workshops must be offered per year.
  - One topic must be on “in demand” careers from the Statewide Demand Occupations list as defined by the Department of Labor and Workforce Development.
- Offer assistance in applying to/entering educational programs, or technical schools.

- Make information available for Certification programs, job training programs, degree programs, or other educational services.
  - While many DH Programs offer certain workshops or training programs to participants directly, others refer to community colleges or other training programs as ways for displaced homemakers to receive educational services.
- Develop topics that will help individuals obtain employment and succeed in the workplace.
  - Examples include dressing for the workplace, interviewing skills, and barriers to employment.
- Provide services that include appropriate assessment tools such as career, inventory assessment tools and the use of educational evaluation services (Myers Briggs, Strong, Self-Directed Search, O-Net, etc.).
- Include referrals to remedial education, ESL, vocational training and other educational programs. Implement follow-up services to ensure enrollment and completion of these programs.
- Document results of evaluations in web-based data system provided by DCF in participant case/service notes.
- Offer remedial education (such as ESL, Literacy, GED) on-site, or in partnership with other community providers or educational institutions.
- Generate an Individualized Plan with each person entering a vocational education program/educational institute. The career plan should be a step-by-step outline of the courses needed, application process, funds needed, assistance with applications for any grants, and/or FAFSA forms. Participants also should be assisted with looking into funding through WIOA and the One Stop organization in each applicable geographical area.

Standard 5: Legal counseling and referral services

- Provide workshops, information and referral services to legal clinics, seminars.
- Work in collaboration with other agencies, attorneys and local courts to provide information sessions and consults. Programs are encouraged to find professionals who are willing to share information about legal issues and that may offer seminars, trainings and consults for appropriate individuals.

- Document the referral services, collaborations and partnerships in the DCF data management system.

Standard 6: Outreach and information

- Establish collaborations and partnerships with federal/state/local community agencies and groups to provide access to a comprehensive referral system so that participants will receive appropriate services based on their needs.
- Document these collaborations and partnerships in the Narrative Report section of the web-based data management system provided by DCF.
- Enter information in the narrative section in a web-based data management system provided by DCF to include partnerships, collaborations, events provided for participants, copies of any written agreements, sub-contracts and MOU's. Agencies will still need to forward consultant agreements, sub-contracts, MOU's to the contract administrator.
- List any planned events or activities that will be provided during the contract.

**F. Reporting Requirements**

Required Reporting Requirements: All programmatic reporting and level of service reporting will be made via a web-based data management system provided by DCF. DCF will download the information on the 10<sup>th</sup> of every month for reporting to the Commissioners dashboard.

- Mandated evaluations/assessments may include, but not be limited to, the Hope Scale and Self-Sufficiency Matrix. 100% of participants will have Participant Profiles in the DCF determined management data system. In addition, providers also will be required to enter all other education and vocation assessments, as appropriate.
- An interim follow-up date should be identified at the time of the goal setting session. The date should be set for a time after the participant receives services and could be expected to achieve short-term outcomes.
- Sessions will include a discussion of all other services available on and off-site. This includes referrals, support services, and follow-up services.

## **G. Funding Information**

All funding is subject to appropriation. Continuation of funding is contingent upon the availability of funds in future fiscal years. Funding is available up to \$750,000. It is expected that Applicants shall receive up to \$150,000 in each county. DCF reserves the right to award all or a portion of the requested amount. One Displaced Homemaker (DH) Program will be funded in each of the following New Jersey counties: Camden, Cape May, Mercer, Salem, Somerset counties. Applicants must submit a proposal for each county they intend to provide a program in as part of the application process.

Universities are reminded that this is a competitive process and on notice that no annual increases will be considered as part of this contract to salaries, fringe or benefits for future negotiations or contracts, unless approved by the State Legislature for all contracting entities.

This funding is for a twelve-month period. Matching funds are not required.

Proposals that demonstrate the leveraging of other financial resources are encouraged.

Funds awarded under this program may not be used to supplant or duplicate existing funding.

Any expenses incurred prior to the effective date of the contract will not be reimbursed by DCF.

## **H. Applicant Eligibility Requirements**

1. Applicants must be for profit or non-profit corporations and/or Universities that are duly registered to conduct business within the State of New Jersey.
2. Applicants must be in good standing with all State and Federal agencies with which they have an existing grant or contractual relationship.
3. If Applicant is under a corrective action plan with DCF (inclusive of its Divisions and Offices) or any other New Jersey State agency or authority, the Applicant may not submit a proposal for this RFP if written notice of such limitation has been provided to the Agency or authority. Responses shall not be reviewed and considered by DCF until all deficiencies listed in the corrective action plan have been eliminated and progress maintained to the satisfaction of DCF for the period as required by the written notice.
4. Applicants shall not be suspended, terminated or barred for deficiencies in performance of any award, and if applicable, all past issues must be resolved as demonstrated by written documentation.

5. Applicants that are presently under contract with DCF must follow the terms and conditions of their contract.
6. Where required, all applicants must hold current State licenses.
7. Applicants that are not governmental entities must have a governing body that provides oversight as is legally required.
8. Applicants must have the capability to uphold all administrative and operating standards as outlined in this document.
9. All applicants must have a Data Universal Numbering System (DUNS) number. To acquire a DUNS number, contact the dedicated toll-free DUNS number request line at 1-866-705-5711 or inquire on-line at: <http://www.dnb.com>
10. Any fiscally viable entity that meets the eligibility requirements, terms and conditions of the RFP, and the contracting rules and regulations set forth in the DCF Contract Policy and Information Manual (N.J.A.C. 10:3) may apply.

**I. RFP Schedule**

<b>March 20, 2019</b>	<b>Deadline for Email Questions sent to <a href="mailto:DCF.ASKRFP@dcf.nj.gov">DCF.ASKRFP@dcf.nj.gov</a></b>
<b>April 17, 2019</b>	<b>Deadline for Receipt of Proposals by 12:00PM</b>

Proposals received after 12:00 PM on **April 17, 2019** will **not** be considered. Applicants shall submit **one (1) signed original** and should submit **one CD ROM** as indicated below.

Proposals must be delivered either:

**1) In person to:**

Catherine Schafer, Director of Grants, Integrity and Accountability  
 Department of Children and Families  
 50 East State Street, 3rd floor  
 Trenton, New Jersey 08625-0717

Please allow time for the elevator and access through the security guard. Applicants submitting proposals in person or by commercial carrier shall submit **one (1) signed original** and should submit **one CD ROM** with all documents.

**2) Commercial Carrier (hand delivery, federal express or UPS) to:**

Catherine Schafer, Director of Grants, Integrity and Accountability  
 Department of Children and Families  
 50 East State Street, 3rd floor  
 Trenton, New Jersey 08625-0717

Applicants submitting proposals in person or by commercial carrier shall submit **one (1) signed original** and should submit **one CD ROM** with all documents.

### **3) Online:**

DCF offers the alternative for our bidders to submit proposals electronically. Only a registered Authorized Organization Representative (AOR) or the designated alternate is eligible to send in a submission by submitting an AOR form.

AOR Registration forms and online training are available on our website at: <http://www.nj.gov/dcf/providers/notices/requests/>

See *Standard Documents for RFPs* for forms.

- [Submitting Requests for Proposal Electronically PowerPoint \(pdf\)](#)
- [Registration for the Authorized Organization Representative \(AOR\) Form](#)

DCF recommends that you do not wait until the date of delivery in case there are technical difficulties during your submission. Registered AOR forms may be received 5 business days prior to the date the bid is due.

## **J. RFP Review Process**

### **1. Screening for Eligibility, Conformity and Completeness**

DCF will screen proposals for eligibility and conformity with the specifications set forth in this RFP. A preliminary review will be conducted to determine whether the application is eligible for evaluation or immediate rejection.

The following criteria will be considered, where applicable, as part of the preliminary screening process:

- a) The application was received prior to the stated deadline
- b) The application is signed and authorized by the applicant's Chief Executive Officer or equivalent
- c) The applicant attended the Bidders Conference (if required)
- d) The application is complete in its entirety, including all required attachments and appendices
- e) The application conforms to the specifications set forth in the RFP

Upon completion of the initial screening, proposals meeting the requirements of the RFP will be distributed to the Proposal Evaluation Committee for its review and recommendations. Failure to meet the criteria outlined above, or the submission of incomplete or non-responsive applications constitutes grounds for immediate rejection of the proposal, if such absence affects the ability of the committee to fairly judge the application.

## **2. Proposal Review Process**

DCF will convene a Proposal Evaluation Committee in accordance with existing regulation and policy. The Committee will review each application in accordance with the established criteria outlined in Section II of this document. All reviewers, voting and advisory, will complete a conflict of interest form. Individuals with conflicts or the appearance of a conflict will be disqualified from participation in the review process. The voting members of the Proposal Evaluation Committee will review proposals, deliberate as a group, and then independently score applications to determine the final funding decisions.

The Department reserves the right to request that applicants present their proposal in person for final scoring. In the event of a tie in the scoring by the Committee, the bidders that are the subject of the tie will provide a presentation of their proposal to the evaluation committee. The evaluation committee will request specific information and/or specific questions to be answered during a presentation by the provider and a brief time-constrained presentation. The presentation will be scored out of 50 possible points, based on the following criteria and the highest score will be recommended for approval as the winning bidder.

Requested information was covered-	10 Points
Approach to the contract and program design was thoroughly and clearly explained and was consistent with the RFP requirements-	20 Points
Background of organization and staffing explained-	10 Points
Speakers were knowledgeable about topic-	5 Points
Speakers responded well to questions-	5 Points

The Department also reserves the right to reject all proposals when circumstances indicate that it is in its best interest to do so. The Department's best interests in this context include but are not limited to: loss of funding for the contract; the inability of the applicant to provide adequate services; the

applicant's lack of good standing with the Department, and any indication, including solely an allegation, of misrepresentation of information and/or non-compliance with any State of New Jersey contracts, policies and procedures, or State and/or Federal laws and regulations.

All applicants will be notified in writing of the Department's intent to award a contract.

### **3. Special Requirements**

The successful Applicant shall maintain all documentation related to proof of services, products, transactions and payments under this contract for a period of five years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller upon request.

Applicants must comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27, the State Affirmative Action policy. A copy is attached as **Exhibit A.**

Applicants must comply with laws relating to Anti- Discrimination as attached as **Exhibit B.**

All applicants are advised that any software purchased in connection with the proposed project must receive prior approval by the New Jersey Office of Information Technology.

Applicants also are advised that any data collected or maintained through the implementation of the proposed program shall remain the property of DCF.

Organ and Tissue Donation: As defined in section 2 of P.L. 2012, c. 4 (N.J.S.A.52:32-33), contractors are encouraged to notify their employees, through information and materials or through an organ and tissue awareness program, of organ donation options. The information provided to employees shall be prepared in collaboration with the organ procurement organizations designated pursuant to 42 U.S.C. §1320b-8 to serve in this State.

### **K. Appeals**

An appeal of the selection process will be heard only if it is alleged that the Department has violated a statutory or regulatory provision in awarding the grant. An appeal will not be heard based upon a challenge to the evaluation of a proposal. Applicants may appeal by submitting a written request to:



Office of Legal Affairs  
Contract Appeals  
50 East State Street 4<sup>th</sup> Floor  
Trenton NJ 08625

no later than ten (10) business days following receipt of the notification or by the deadline posted in this announcement.

#### **L. Post Award Review**

As a courtesy, DCF may offer unsuccessful applicants an opportunity to review the Evaluation Committee's rating of their individual proposals. All Post Award Reviews will be conducted by appointment only.

Applicants may request a Post Award Review by contacting: [DCF.ASKRFP@dcf.nj.gov](mailto:DCF.ASKRFP@dcf.nj.gov)

Post Award Reviews will not be conducted after six months from the date of issuance of this RFP.

#### **M. Post Award Requirements**

Selected applicants will be required to comply with the terms and conditions of the Department of Children and Families' contracting rules and regulations as set forth in the Standard Language Document, the Contract Reimbursement Manual and the Contract Policy and Information Manual.

Applicants may review these items via the Internet at [www.nj.gov/dcf/providers/contracting/manuals](http://www.nj.gov/dcf/providers/contracting/manuals)

Selected applicants also will be required to comply with all applicable State and Federal laws and statutes, assurances, certifications and regulations regarding funding.

Upon receipt of the award announcement, and where appropriate, selected applicants will be minimally required to submit one (1) copy of the following documents:

1. Acknowledgement of Receipt of the NJ State Policy and Procedures returned to the DCF Office of the EEO/AA
2. DCF Third Party Contract Reforms Attestation
3. Proof of Insurance naming DCF as additionally insured from agencies

4. Bonding Certificate
5. Notification of Licensed Public Accountant (NLPA) with a copy of Accountant's Certification
6. ACH-Credit Authorization for automatic deposit (for new agencies only)

The actual award of funds is contingent upon a successful contract negotiation. If, during the negotiations, it is found that the selected applicant is incapable of providing the services or has misrepresented any material fact or its ability to manage the program, the notice of intent to award may be rescinded.

## **Section II – Application Instructions**

### **A. Proposal Requirements and Review Criteria**

All applications will be evaluated and scored in accordance with the following criteria:

The narrative portion of the proposal should be double-spaced with margins of 1 inch on the top and bottom and 1 inch on the left and right. The font shall be no smaller than 12 points in Arial or Times New Roman. There is a 20-page limitation for the narrative portion of the grant application. A one (1) point reduction per page will be administered to proposals exceeding the page limit requirements. Five (5) points will be deducted for each missing document. If the deductions total 20 points or more, the proposal shall be rejected as non-responsive. The narrative must be organized appropriately and address the key concepts outlined in the RFP. The DCF Budget and attachments do not count towards the narrative page limit.

Proposals may be fastened by a heavy-duty binder clip. Do not submit proposals in loose-leaf binders, plastic sleeves or folders. Proposals may not be stapled.

Each proposal narrative must contain the following items organized by heading in the same order as presented below:

#### **I. Organizational Fit (10 Points)**

Describe how this current initiative is consistent with your:

- mission and vision
- past experience implementing similar initiatives
- past experience working with youth and families involved with DCF or other population served
- current programming

## II. Organizational Capacity

(40 Points)

1) Describe how the requirements of this initiative will be met through your governance and management structure, including the roles of senior executives and Board officers.

- **Include a Governing Body List. (A “governing body” is any of the following: Board or Directors -or- Managing Partners, if LLC/Partnership, -or- Chosen Freeholders of Responsible Governing Body. List must be dated and include the following: names, titles, emails, phone numbers, addresses, and terms for all members of Governing Body.) as part of the appendix.**
- **Include a current Agency-Wide Organizational Chart as part of the appendix.**

2) Describe how the requirements of this initiative will be met through your existing collaborations, partnerships and collaborative efforts with other community and systems partners.

- **Include letter of commitment or MOU as part of the appendix. (if relevant to your program) If not applicable, include a written statement**
- **Include no more than 3 letters of support, related to this application, as part of the appendix.**

3) Describe how the requirements of this initiative will be met through your membership in professional advisory boards.

4) Describe how the requirements of this initiative will be met through your policies implementing trauma-informed practices

- **Include written policies implementing trauma-informed practices, if available.**

5) Describe how the requirements of this initiative will be met through your commitment to cultural competency and diversity, and how your plans to ensure the needs of various and diverse cultures within the target community will be met in a manner consistent with the Law Against Discrimination (NJSA 10:51 seq.).

6) Describe how the requirements of this initiative will be met through your plans for program accessibility that encompass site description, safety considerations, and transportation options.

- **Also, provide description of program space.**
- **Submit a description/floor plan of program space as part of the appendix.**
- **Additional photos and/or floor plans are also welcomed-attach as part of the appendix.**

7) Describe how the requirements of this initiative will be met through your strategies for identifying and engaging the target population and for maintaining their participation in services in accordance with need.

8) Indicate the number, qualifications and skills of all staff, consultants, sub-grantees and/or volunteers who will perform the proposed service activities.

- **Include an organizational chart for the proposed program operation as part of the appendix.**
- **Include job descriptions that include all educational and experiential requirements as part of the appendix; and**
- **Include Professional Licenses related to job responsibilities, if applicable.**
- **Include resumes of any existing staff who will perform the proposed services as part of the appendix.**
- **Include staff patterns as part of the appendix**

9) Provide a feasible timeline for implementing the proposed services.

- **Include a Program Implementation Schedule attached as part of the appendix**

### **III. Organizational Supports**

**(25 Points)**

1) Describe how this initiative will be supported by your management, supervision, coaching and evaluation of staff performance.

2) Describe how this initiative will be supported by your leveraging of the resources of providers, communities, and other stake holders.

3) Describe how this initiative will be supported by your collection, maintenance and analysis of data, either through an identified database system or specified alternative methods (i.e. excel spreadsheets).

4) Describe procedures that will be used for data collection, management and timely reporting to DCF. Provide a description of participant data to be recorded, the intended use of that data and the means of maintaining confidentiality of student records.

5) Submit a **signed Attestation as an appendix (see Attachment 3)**.

6) Describe how this initiative will be supported by your quality assurance and performance improvement processes, including the meaningful role of those to be served.

7) Describe how this initiative will be supported by your willingness to engage in participatory, collaborative evaluation planning with DCF to improve and finalize outcome indicators.

8) Describe how this initiative will be supported by your training offerings to program staff who will be in contact with youth, including transportation staff.

- **Include a Curricula Table of Contents for current and proposed training.**

9) Confirm in your narrative that your organization agrees to meet or exceed the deliverables set forth in the Logic Model Attachment 1.

#### **IV. Budget**

**(15 Points)**

The Department will consider the cost efficiency of the proposed budget as it relates to the anticipated level of services (LOS). Therefore, applicants must clearly indicate in this section of the Narrative how this funding will be used to meet the project goals and/or requirements. Provide a line item budget and narrative for the proposed project/program. The budget narrative must be part of the 20-page proposal.

- **The DCF Budget form is provided as Exhibit C and is to be attached as an Appendix.**

The budget shall be reasonable and reflect the scope of responsibilities required to accomplish the goals of this project. The budget shall also reflect a 12-month operating schedule and must include, in separate columns, total funds needed for each line item, the funds requested in this grant, and funds secured from other sources. All costs associated with the completion of the project must be clearly delineated and the budget narrative must clearly articulate budget items, including a description of miscellaneous expenses or "other" items.

The grantee is expected to adhere to all applicable state cost principles.

Standard DCF Budget forms are available at:  
<http://www.state.nj.us/dcf/providers/contracting/forms/> and a description of  
 General and Administrative Costs are available at

<http://www.nj.gov/dcf/providers/notices/requests/>

See *Standard Documents for RFPs* for forms.

**V. Leveraging (10 Points)**

Identify the total amount and source of any additional financial resources that will be committed to the proposed project as a leveraging mechanism.

**B. Supporting Documents**

Applicants must submit a complete proposal signed and dated by the Chief Executive Officer or equivalent and should submit a CD ROM containing Word or PDF versions of all required documents. There is a 20-page limitation for the narrative portion of the grant application. A one (1) point reduction per page will be administered to proposals exceeding the page limit requirements. Failure to submit any of the required documents requested in this RFP will result in a loss of five (5) points per item from the total points awarded for the proposal.

All supporting documents submitted in response to this RFP must be organized in the following manner:

<b>Part I: Proposal Checklist (Other than Universities)</b>	
1	<input type="checkbox"/> <b>Proposal Cover Sheet</b> – (signed and dated) Website: <a href="http://www.nj.gov/dcf/providers/notices/requests/#2">http://www.nj.gov/dcf/providers/notices/requests/#2</a>  Form: <a href="http://www.nj.gov/dcf/providers/notices/Proposal.Cover.Sheet.doc">http://www.nj.gov/dcf/providers/notices/Proposal.Cover.Sheet.doc</a>
2	<input type="checkbox"/> <b>Table of Contents</b> – Please number and label with page numbers if possible in the order as stated in Part I & Part II Appendices for paper copies, CD and electronic copies.
3	<input type="checkbox"/> <b>Proposal Narrative</b> in following order <b>20-Page Limitation</b> <ol style="list-style-type: none"> <li>I. Organizational Fit</li> <li>II. Organizational Capacity</li> <li>III. Organizational Support</li> <li>IV. Budget</li> <li>V. Leveraging</li> </ol>

<b>Part II: Appendices</b>	
4	<input type="checkbox"/> <b>Job descriptions</b> that include all educational and experiential requirements
5	<input type="checkbox"/> <b>Resumes</b> of any existing staff who will perform the proposed services. (please <u>do not</u> provide home addresses or personal phone numbers)
6	<input type="checkbox"/> <b>Staffing Patterns</b>
7	<input type="checkbox"/> <b>Current Agency-Wide Organizational Chart</b>
8	<input type="checkbox"/> <b>Organizational Chart for the proposed program operation</b>
9	<input type="checkbox"/> <b>Letter of commitment or MOU.</b> (if relevant to your program) If not applicable, include a written statement.
10	<input type="checkbox"/> <b>No more than 3 letters of support</b> related to this application
11	<input type="checkbox"/> <b>A description/floor plan of program space. Additional photos and/or floor plans are also welcomed.</b>
12	<input type="checkbox"/> <b>Program Implementation Schedule</b>
13	<input type="checkbox"/> <b>Signed Attestation (Attachment 3)</b>
14	<input type="checkbox"/> <b>Curricula Table of Contents for current and proposed training</b>
15	<input type="checkbox"/> <b>Written policies implementing trauma-informed practices</b>
16	<input type="checkbox"/> <b>DCF Budget Form</b>
17	<input type="checkbox"/> <b>Agency's Conflict of Interest policy</b>
18	<input type="checkbox"/> <b>Copies of any audits (not financial audit) or reviews</b> (including corrective action plans) completed or in process by DCF (inclusive of DCF Licensing, Divisions and Offices) or other State entities within the last 2 years. If available, a corrective action plan should be provided and any other pertinent information that will explain or clarify the applicant's position. If not applicable, include a written statement. Applicants are on notice that DCF may consider all materials in our records concerning audits, reviews or corrective active plans as part of the review process.
19	<input type="checkbox"/> <b>Include a Governing Body List. (A "governing body" is any of the following: Board or Directors -or- Managing Partners, if LLC/Partnership, -or- Chosen Freeholders of Responsible Governing Body).</b>  List must be Dated and include the following: <ol style="list-style-type: none"> <li>a. Names</li> <li>b. Titles,</li> <li>c. Emails</li> <li>d. Phone numbers</li> <li>e. Address <b>and</b></li> <li>f. Terms</li> </ol>

20	<input type="checkbox"/>	<b>DCF Signed Standard Language Document (SLD)</b> [Version: Rev. June 6, 2014] Form: <a href="http://www.nj.gov/dcf/documents/contract/forms/StandardLanguage.doc">http://www.nj.gov/dcf/documents/contract/forms/StandardLanguage.doc</a>
21	<input type="checkbox"/>	Document showing <b>Data Universal Numbering System (DUNS)</b> Number [2006 Federal Accountability & Transparency Act (FFATA)] Website: <a href="http://www.dnb.com">http://www.dnb.com</a> Helpline: 1-866-705-5711
22	<input type="checkbox"/>	<b>System for Award Management (SAM)</b> printout (or <b>Renewal</b> ) showing "active" status (free of charge). Website: <a href="https://www.sam.gov/portal/public/SAM">https://www.sam.gov/portal/public/SAM</a> Helpline: 1-866-606-8220
23	<input type="checkbox"/>	Applicable Consulting <b>Contracts, Affiliation Agreements/Memoranda</b> of Understanding related to this RFP. If not applicable, include a written statement
24	<input type="checkbox"/>	<b>Business Associate Agreement/HIPAA</b> , with signature under Business Associate [Version: Rev. 9-2013] Form: <a href="http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc">http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc</a>
25	<input type="checkbox"/>	<b>Professional Licenses</b> related to job responsibilities for this RFP. If not applicable, include a written statement
26	<input type="checkbox"/>	<b>Affirmative Action Certificate -or- Renewal Application [AA302]</b> sent to Treasury Website: <a href="http://www.state.nj.us/treasury/purchase/forms.shtml">http://www.state.nj.us/treasury/purchase/forms.shtml</a> Form: <a href="http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf">http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf</a>
27	<input type="checkbox"/>	<b>Certificate of Incorporation</b> Website: <a href="http://www.nj.gov/treasury/revenue/filecerts.shtml">http://www.nj.gov/treasury/revenue/filecerts.shtml</a>
28	<input type="checkbox"/>	<b>For Profit: NJ Business Registration</b> Certificate with the Division of Revenue. See instructions for applicability to your organization. Website: <a href="http://www.nj.gov/njbusiness/registration/">http://www.nj.gov/njbusiness/registration/</a> If not applicable, include a written statement.
29	<input type="checkbox"/>	<b>Agency By-laws or Management Operating Agreement if an LLC</b>
30	<input type="checkbox"/>	<b>Tax Exempt Organization Certification - (ST-5) -or- IRS Determination Letter 501(c)(3)</b> Website: <a href="http://www.state.nj.us/treasury/taxation/exemptintro.shtml">http://www.state.nj.us/treasury/taxation/exemptintro.shtml</a>
31	<input type="checkbox"/>	<b>Disclosure of Investigations &amp; Other Actions Involving Bidder Form (PDF)</b> (signed and dated) <a href="#">[Version 8-4-17]</a> Form: <a href="http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf">http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf</a>



32	<input type="checkbox"/>	<p><b>Disclosure of Investment Activities in Iran (PDF)</b> (signed and dated) <a href="#">[Version 6-19-17]</a></p> <p>Form: :  <a href="http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf">http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf</a></p>
33	<input type="checkbox"/>	<p><b>For Profit: Statement of Bidder/Vendor Ownership Form (PDF)</b> (signed and dated) <a href="#">[Version 6-19-17]</a></p> <p>See instructions for applicability to your organization.  Form:  <a href="http://www.state.nj.us/treasury/purchase/forms/OwnershipDisclosure.pdf">http://www.state.nj.us/treasury/purchase/forms/OwnershipDisclosure.pdf</a></p> <p>If not applicable, include a written statement</p>
34	<input type="checkbox"/>	<p><b>For Profit: Two-Year Chapter 51/Executive Order 117 Vendor Certification -and- Disclosure of Political Contributions</b> (signed and dated) [Version: Rev 4/17/15]. See instructions for applicability to your organization.  Website: <a href="http://www.state.nj.us/treasury/purchase/forms.shtml">http://www.state.nj.us/treasury/purchase/forms.shtml</a>  If not applicable, include a written statement.</p>
35	<input type="checkbox"/>	<p><b>Certification Regarding Debarment-(Signed and dated)</b>  Website: <a href="http://www.nj.gov/dcf/providers/notices/requests/#2">http://www.nj.gov/dcf/providers/notices/requests/#2</a></p> <p>Form: <a href="http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf">http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf</a></p>
36	<input type="checkbox"/>	<p><b>Statement of Assurances – (Signed and dated)</b> Website:  <a href="http://www.nj.gov/dcf/providers/notices/requests/#2">http://www.nj.gov/dcf/providers/notices/requests/#2</a></p> <p>Form:  <a href="http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc">http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc</a></p>
37	<input type="checkbox"/>	<p><b>Tax Forms:</b>  <b>Non Profit Form 990</b> Return of Organization Exempt from Income Tax <b>or- For Profit Form 1120</b> US Corporation Income Tax Return <b>or-LLC Applicable Tax Form</b> and may delete or redact any SSN or personal information</p>

## Appendices Checklist for Universities

All supporting documents submitted in response to this RFP must be organized in the following manner for Universities:

<b>Part I: Proposal Checklist for Universities</b>	
1	<input type="checkbox"/> <b>Proposal Cover Sheet</b> (signed and dated) – Use the RFP forms found directly under the Notices section on Website: <a href="http://www.nj.gov/dcf/providers/notices/requests/#2">http://www.nj.gov/dcf/providers/notices/requests/#2</a>  Form: <a href="http://www.nj.gov/dcf/providers/notices/Proposal.Cover.Sheet.doc">http://www.nj.gov/dcf/providers/notices/Proposal.Cover.Sheet.doc</a>
2	<input type="checkbox"/> <b>Table of Contents</b> – Please number and label with page numbers if possible in the order as stated in Part I & Part II Appendices for paper copies, CD and electronic copies.
3	<input type="checkbox"/> <b>Proposal Narrative</b> in following order <b>20-Page Limitation</b> <ul style="list-style-type: none"> <li>I. Organizational Fit</li> <li>II. Organizational Capacity</li> <li>III. Organizational Support</li> <li>IV. Budget</li> <li>V. Leveraging</li> </ul>
<b>Part II: Appendices</b>	
4	<input type="checkbox"/> <b>Job Descriptions that include all educational and experiential requirements</b>
5	<input type="checkbox"/> <b>Resumes of any existing staff who will perform the proposed services</b> (please <u>do not</u> provide home addresses or personal phone numbers)
6	<input type="checkbox"/> <b>Letter of Commitment or MOU</b> (if relevant to your program). If not applicable, include a written statement.
7	<input type="checkbox"/> <b>No more than 3 letters of support</b> related to this application
8	<input type="checkbox"/> <b>Signed Attestation</b>
9	<input type="checkbox"/> <b>Curricula Table of Contents for current and proposed training</b>
10	<input type="checkbox"/> <b>Staffing Patterns</b>
11	<input type="checkbox"/> <b>Current Agency-Wide Organization Chart</b>
12	<input type="checkbox"/> <b>Organizational Chart for the proposed program operation</b>
13	<input type="checkbox"/> <b>Program Implementation Schedule</b>

14	<input type="checkbox"/>	<b>Written policies implementing trauma-informed practices</b>
15	<input type="checkbox"/>	<b>DCF Budget form</b>
16	<input type="checkbox"/>	Agency's <b>Conflict of Interest policy</b>
17	<input type="checkbox"/>	<b>A description/floor plan of program space</b> <b>Additional photos and/or floor plans are also welcomed.</b>
18	<input type="checkbox"/>	<b>Copies of any audits or reviews (not financial audit)</b> (including corrective action plans) completed or in process by DCF (inclusive of DCF Licensing, Divisions and Offices) or other State entities within the last 2 years. If available, a corrective action plan should be provided and any other pertinent information that will explain or clarify the applicant's position. If not applicable, include a written statement. Applicants are on notice that DCF may consider all materials in our records concerning audits, reviews or corrective active plans as part of the review process.
19	<input type="checkbox"/>	<b>Include a Governing Body List. (A "governing body" is any of the following: Board or Directors -or- Managing Partners, if LLC/Partnership, -or- Chosen Freeholders of Responsible Governing Body).</b>  List must be Dated and include the following: <ul style="list-style-type: none"> <li>g. Names</li> <li>h. Titles,</li> <li>i. Emails</li> <li>j. Phone numbers</li> <li>k. Address <b>and</b></li> <li>l. Terms</li> </ul>
20	<input type="checkbox"/>	<b>S.208-Departmental Agreement with Another State Agency-Signed &amp; Dated</b> <a href="http://www.dcf.state.nj.us/businessoperations/contractadmin/Documents/2032008.pdf">http://www.dcf.state.nj.us/businessoperations/contractadmin/Documents/2032008.pdf</a>
21	<input type="checkbox"/>	Document showing <b>Data Universal Numbering System (DUNS)</b> Number [2006 Federal Accountability & Transparency Act (FFATA)] Website: <a href="http://www.dnb.com">http://www.dnb.com</a> Helpline: 1-866-705-5711
22	<input type="checkbox"/>	<b>System for Award Management (SAM)</b> printout (or <b>Renewal</b> ) showing "active" status (free of charge). Website: <a href="https://www.sam.gov/portal/public/SAM">https://www.sam.gov/portal/public/SAM</a> Helpline: 1-866-606-8220
23	<input type="checkbox"/>	Applicable Consulting <b>Contracts</b> , Affiliation <b>Agreements/Memoranda</b> of Understanding related to this RFP. If not applicable, include a written statement

24	<input type="checkbox"/>	<b>Business Associate Agreement/HIPAA</b> , with signature under Business Associate [Version: Rev. 9-2013] Form: <a href="http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc">http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc</a>
25	<input type="checkbox"/>	<b>Professional Licenses</b> related to job responsibilities for this RFP. If not applicable, include a written statement
26	<input type="checkbox"/>	<b>Affirmative Action Certificate -or- Renewal Application [AA302]</b> sent to Treasury Website: <a href="http://www.state.nj.us/treasury/purchase/forms.shtml">http://www.state.nj.us/treasury/purchase/forms.shtml</a> Form: <a href="http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf">http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf</a>
27	<input type="checkbox"/>	<b>Disclosure of Investigations &amp; Other Actions Involving Bidder Form (PDF)</b> (signed and dated) Form: <a href="http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf">http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf</a>
28	<input type="checkbox"/>	<b>Disclosure of Investment Activities in Iran (PDF)</b> (signed and dated) Form: <a href="http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf">http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf</a>
29	<input type="checkbox"/>	<b>For Profit: Two-Year Chapter 51/Executive Order 117 Vendor Certification -and- Disclosure of Political Contributions</b> (signed and dated) [Version: Rev 4/17/15]. See instructions for applicability to your organization. Website: <a href="http://www.state.nj.us/treasury/purchase/forms.shtml">http://www.state.nj.us/treasury/purchase/forms.shtml</a> If not applicable, include a written statement
30	<input type="checkbox"/>	<b>Certification Regarding Debarment</b> (signed and dated) Form: <a href="http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf">http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf</a>
31	<input type="checkbox"/>	<b>Statement of Assurances</b> (signed and dated) – Use the RFP forms found directly under the Notices section: Website: <a href="http://www.nj.gov/dcf/providers/notices/">www.nj.gov/dcf/providers/notices/</a> Form: <a href="http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc">http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc</a>
32	<input type="checkbox"/>	Most recent <b>Financial Audit or Financial Statement (certified by accountant or accounting firm)</b> <b>Audit:</b> For agencies expending over \$100,000 in combined Federal/State Awards <b>-or-</b> <b>Financial Statement:</b> For agencies expending under \$100,000 <b>Policy:</b> <a href="http://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_audit.pdf">http://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_audit.pdf</a>

\* Standard forms for RFP's are available at:  
<http://www.nj.gov/dcf/providers/notices/requests/>

See *Standard Documents for RFPs* for forms.

Standard DCF Annex B (budget) forms are available at:  
<http://www.state.nj.us/dcf/providers/contracting/forms/>

\*\* Treasury required forms are available on the Department of the Treasury website at:  
<http://www.state.nj.us/treasury/purchase/forms.shtml>  
Click on Vendor Information and then on Forms.

Standard Language Document, the Contract Reimbursement Manual and the Contract Policy and Information Manual may be reviewed via the Internet at:  
[www.nj.gov/dcf/providers/contracting/manuals](http://www.nj.gov/dcf/providers/contracting/manuals)

### C. Requests for Information and Clarification

#### Question and Answer:

DCF will provide eligible applicants additional and/or clarifying information about this initiative and application procedures through a time-limited electronic Question and Answer Period. Inquiries will not be accepted after the closing date of the Question and Answer Period.

Questions must be submitted in writing via email to:  
DCF.ASKRFP@dcf.nj.gov.

Written questions must be directly tied to the RFP. Questions should be asked in consecutive order, from beginning to end, following the organization of the RFP. All inquiries submitted to DCF.ASKRFP@dcf.nj.gov must identify, in the Subject heading, the specific RFP for which the question/clarification is being sought. Each question should begin by referencing the RFP page number and section number to which it relates.

Written inquiries will be answered and posted on the DCF website as a written addendum to the RFP at:

<http://www.nj.gov/dcf/providers/notices/requests/>

Technical inquiries about forms and other documents may be requested anytime through DCF.ASKRFP@dcf.nj.gov.

All other types of inquiries will not be accepted. **Applicants may not contact the Department directly, in person, or by telephone, concerning this RFP.**

**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 available at [www.state.nj.us/treasury/contract\\_compliance](http://www.state.nj.us/treasury/contract_compliance)).

The contractor and its subcontractors shall furnish such reports or other documents to the Department of Children and Families, 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 Department of Children and Families, 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.**

**EXHIBIT B**  
TITLE 10. CIVIL RIGHTS  
CHAPTER 2. DISCRIMINATION IN EMPLOYMENT ON PUBLIC WORKS  
*N.J. Stat. § 10:2-1 (2012)*

§ 10:2-1. Antidiscrimination provisions

Antidiscrimination provisions. Every contract for or on behalf of the State or any county or municipality or other political subdivision of the State, or any agency of or authority created by any of the foregoing, for the construction, alteration or repair of any public building or public work or for the acquisition of materials, equipment, supplies or services shall contain provisions by which the contractor agrees that:

a. In the hiring of persons for the performance of work under this contract or any subcontract hereunder, or for the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under this contract, no contractor, nor any person acting on behalf of such contractor or subcontractor, shall, by reason of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex, discriminate against any person who is qualified and available to perform the work to which the employment relates;

b. No contractor, subcontractor, nor any person on his behalf shall, in any manner, discriminate against or intimidate any employee engaged in the performance of work under this contract or any subcontract hereunder, or engaged in the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under such contract, on account of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex;

c. There may be deducted from the amount payable to the contractor by the contracting public agency, under this contract, a penalty of \$ 50.00 for each person for each calendar day during which such person is discriminated against or intimidated in violation of the provisions of the contract; and

d. This contract may be canceled or terminated by the contracting public agency, and all money due or to become due hereunder may be forfeited, for any violation of this section of the contract occurring after notice to the contractor from the contracting public agency of any prior violation of this section of the contract.

No provision in this section shall be construed to prevent a board of education from designating that a contract, subcontract or other means of procurement of goods, services, equipment or construction shall be awarded to a small business enterprise, minority business enterprise or a women's business enterprise pursuant to P.L.1985, c.490 (*C. 18A:18A-51 et seq.*).



**Exhibit C-Budget Form (12-month operational budget)**

<b>BUDGET CATEGORIES 12-Month Budget</b>	<b>TOTAL COSTS</b>	<b>DCF Funding request</b>	<b>Cash or In-Kind Funds note sources below*</b>
A. Personnel - Salary (hours/week)			
Fringe (% rate)			
B. Consultants & Professional Fees			
C. Materials & Supplies			
D. Facility Costs			
E. Specific Assistance to Clients			
F. Other			
G. Gen. & Adm. (G&A) Costs			
H. Total Operating Costs			
I. Equipment			
J. Total Cost			
<b>K. Revenue (deduct)*</b>	(    )	n/a	n/a
<b>L. Funding Request</b>		n/a	n/a

The budget request shall indicate the Agency's total proposed budget for delivery of the service(s) reduced by the other sources of funding (Line K). If applicable, indicate the sources of leveraged funding and the dollar amounts for each below:

<b>*Other Sources of Funding for this Program: (Specify These)</b>			
Other Funding Amounts:	0	0	0