Rhode Island Office of Veterans Services
Veterans Service Grant Proposal Application

Questions concerning this solicitation must be received by the Rhode Island Office of Veterans Services at vets.info@vets.ri.gov no later than April 3, 2020, 12:00 p.m. Questions should be submitted in a Microsoft Word attachment. Please reference the RFP #072020 on all correspondence. Questions received, if any, will be posted on the Rhode Island Division of Purchasing website as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

The Opening Date & Final Deadline for Proposals for this RFP is April 17, 2020, 12:00 p.m. No applications will be accepted after this time.

Note to Applicants:

• Applicants must register on-line at the Rhode Island Division of Purchasing at www.purchasing.ri.gov.
• Proposals received without a completed RIVIP Bidder Certification Cover Form attached may result in disqualification.
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SECTION 1. INTRODUCTION

The Rhode Island Office of Veterans Services (RIVETS) is soliciting proposals from qualified vendors to provide programs or services for unmet needs of the Veterans community pursuant to the terms of this Request for Proposals (“RFP”) and the State’s General Conditions of Purchase, which may be obtained at the Division of Purchases website at https://www.ridop.ri.gov/.

This is a Request for Proposals, not a Request for Quotes. Responses will be evaluated on the relative merits of the proposal. There will be no public opening and reading of responses received by RIVETS pursuant to this solicitation, other than to name those offerors who have submitted proposals.

SECTION 2: INSTRUCTIONS AND NOTIFICATIONS TO OFFERORS

1. Potential vendors are advised to review all sections of this RFP carefully and to follow instructions completely. Failure to make a complete submission as described elsewhere herein will result in rejection of the proposal.

2. Alternative approaches and/or methodologies to accomplish the desired or intended results of this RFP are solicited. However, proposals that depart from or materially alter the terms, requirements, or scope of work defined by this RFP may be rejected as being non-responsive.

3. All costs associated with developing or submitting a proposal in response to this RFP or for providing oral or written clarification of its content shall be borne by the vendor. The State assumes no responsibility for these costs even if the RFP is cancelled or continued.

4. Proposals are irrevocable for a period of not less than 180 days following the opening date and may not be withdrawn except with the express written permission of the State Purchasing Agent.

5. All pricing submitted will be firm and fixed unless otherwise indicated in the proposal.

6. An award pursuant to this RFP will be made to a prime vendor, or prime vendors in the various categories, who will assume responsibility for all aspects of the work. Subcontracts are permitted, provided their use is clearly indicated in the vendor’s proposal and the subcontractor(s) to be used identified in the proposal.

7. The purchase of goods and/or services under an award made pursuant to this RFP will be contingent on the availability of appropriated funds by the General Assembly.
8. Vendors are advised that all materials submitted to RIVETS for consideration in response to this RFP may be public records as defined in R.I. Gen. Laws § 38-2-1, *et seq.*, and may be released for inspection upon request once an award has been made.

Any information submitted in response to this RFP that a vendor believes are trade secrets or commercial or financial information of a privileged or confidential nature should be clearly marked as such. The vendor should provide a brief explanation as to why each portion of information marked should be withheld from public disclosure. Vendors are advised that RIVETS and/or the Division of Purchases may release records marked confidential by a vendor upon a public records request if the State determines the marked information does not fall within the category of trade secrets or commercial or financial information of a privileged or confidential nature.

9. Interested parties are instructed to visit the RIVETS and Division of Purchasing websites on a regular basis for additional information relating to this solicitation that may be released as an addendum to this RFP.

10. By submission of proposals in response to this RFP, vendors agree to comply with R.I. Gen. Laws § 28-5.1-10, which mandates contractors/subcontractors doing business with the State of Rhode Island exercise the same commitment to equal opportunity as prevails under Federal contracts controlled by Federal Executive Orders 11246, 11625, and 11375.

Vendors are required to ensure that they, and any subcontractors awarded a subcontract under this RFP, undertake or continue programs to ensure that minority group members, women, and persons with disabilities are afforded equal employment opportunities without discrimination based on race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability.

Vendors and subcontractors who do more than $10,000 in government business in one year are prohibited from engaging in employment discrimination based on race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability, and are required to submit an “Affirmative Action Policy Statement.”

Vendors with 50 or more employees and $50,000 or more in government contracts must prepare a written “Affirmative Action Plan” prior to issuance of a purchase order.

For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation.

For further information, contact Vilma Peguero at the Rhode Island Equal Employment Opportunity Office, at 222-1452 or via e-mail at ODEO.EOO@doa.ri.gov.
11. In accordance with R.I. Gen. Laws § 7-1.2-1401, no foreign corporation has the right to transact business in Rhode Island until it has procured a certificate of authority from the Secretary of State. This is a requirement only for successful vendor(s). For further information, contact the Secretary of State at 222-3040.

12. Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), a “business associate” is a person or entity, other than a member of the workforce of a HIPAA-covered entity, who performs functions or activities on behalf of, or provides certain services to, a HIPAA-covered entity that involves access by the business associate to HIPAA protected health information. A “business associate” also is a subcontractor that creates, receives, maintains, or transmits HIPAA protected health information on behalf of another business associate. The HIPAA rules generally require that HIPAA-covered entities and business associates enter into contracts with their business associates to ensure that the business associates will appropriately safeguard HIPAA protected health information. Therefore, if a Contractor qualifies as a business associate, it will be required to sign a HIPAA business associate agreement.

SECTION 3. SCOPE OF WORK AND ELIGIBILITY REQUIREMENTS

1. You must request funding under one of the 14 categories:

   - **Veterans Living in Poverty.** Includes basic needs, food security, housing, goods and services, emergency financial services, and substance abuse and support programs. The Veteran poverty growth rate is less than that of non-Veterans; however, the overall Veteran poverty rate is rising. The poverty rate for Veterans between the ages of 18 to 34 is higher than all other age groups. Disabled Veterans have higher poverty rates than disabled non-Veterans for all age groups except those over age 65. Programs should focus on reversing these poverty trends.

   - **Veterans Homelessness.** Includes basic needs, goods and services, emergency financial services, rental assistance, home ownership, homeless services, and transitional and permanent housing. There are over 400 chronically homeless Veterans in Rhode Island and a significant number who are at-risk of homelessness. Programs should focus on solutions to address needs not met through existing programs.

   - **Veterans Employment and Employment Training.** Includes job training, job search and preparation services, and business ownership counseling. Programs should focus on preparing Veterans and transitioning service members for meaningful careers, providing entrepreneurship resources and expertise, and protecting re-employment rights.
• **Veterans Education.** Includes GI Bill assistance, financial aid counseling, loans, scholarships, tuition programs, learning skills preparation, and student Veterans organization support. Programs should focus on promoting educational opportunities and supporting student Veterans currently enrolled in schools.

• **Veterans Post Traumatic Stress Disorder (PTSD)/Agent Orange Effects/Burn Pits.** Includes healthcare services, mental health counseling, and recreational and spiritual programs. Programs should focus on promoting wellness and improving outcomes for Veterans facing unique, military-related health challenges caused by PTSD, Agent Orange, and burn pits.

• **Veterans Disability Benefits.** Includes the federal VA entities, Veteran Service Organizations, state agencies, and nonprofit organizations serving individuals with disabilities. Programs should focus on assisting Veterans navigate the benefit application process or improving quality of life.

• **Veterans Long-Term Care.** Includes VA programs and services, caregiver support, palliative care, and nursing home care. Programs should focus on enhancing shared decision making, advance care planning, and related long-term services and supports.

• **Veterans Transportation.** Includes transportation to and from the Providence VA Medical Center locations, other health-related facilities, the VA Regional Office, and places serving basic life needs. Programs should focus on increasing transportation options such as through special public transportation fares for Veterans, joint dispatching, service contracts, feeder services, ride-share, driver training drivers, or other innovative modes of transport.

• **Veterans Family Members/Caregivers.** Includes counseling and support, family readiness groups, education and information services, wellness programs, crisis programs, peer monitoring programs, and substance abuse and support programs. Family Members and caregivers provide crucial support in maintaining households and caring for aging and disabled Veterans. Programs should focus on supporting and assisting those who undertake this important role.

• **Veterans Financial Planning/Services.** Includes compensation, consumer protection, budgetary, pension and tax counseling, unemployment services, and emergency assistance. Programs should focus on preparing transitioning military members for financial success and helping all Veterans obtain financial security.

• **Veterans Legal Services.** Includes legal assistance, pro bono programs, legal clinics, judicial system programs, service records, identification cards, and military awards and discharge review. Programs should focus on access to legal resources to assist
with medical challenges, disability benefits, reemployment rights, debt collection, housing, criminal matters, license restoration, and family law.

- **Veterans Mortuary Affairs.** Includes RI Veterans Memorial Cemetery and other forms of bereavement and memorial assistance. Programs should focus on assisting Veterans plan for end-of-life and supporting families as they cope with the process of death and dying.

- **Veterans Transitional Assistance.** Includes housing, jobs, basic needs, disability assistance, and retirement. Programs should be designed to provide comprehensive services to our service members as they transition from the military to civilian life after their service.

- **Other.** Any social services, programs, or other resources provided to Veterans, family members, and/or caregivers not covered in the other 13 categories.

2. Applicants must be a government agency, non-profit organization, Veteran service organization, a program for the benefit of its Veterans, families, or survivors, or a non-Veteran-related agency that wishes to expand its programming to Veterans.

3. Applicants that do not have a program or does not seek to develop a program that meets the requirements described above are not eligible to apply for this grant.

4. Applicants selected to receive grant funding are required to become a provider-partner in RIServes, the state’s coordinated care network for Veterans and their families. No action is needed during the initial application, this procedure will be explained during the award letter process. Failure to do so will forfeit any award made.

5. Applicants are required to define performance metrics and their targets. In addition to any self-selected performance measures, RIVETS requires an estimate on how many Veterans, Service Members, and military-connected Families your program will serve.

6. Applicants must agree to meet with Rhode Island Office of Veterans Services leadership to review performance measures and assign a delegate to participate in these meetings. A minimum of one meeting will be held if grant funds are awarded. RIVETS reserves the right to call additional meetings as needed.

7. Applicants must be based in Rhode Island or have a significant presence in Rhode Island and agree to use any and all awarded funds solely for the benefit of Rhode Island residents.

8. If awarded funding, applicants must produce a one-page testimonial or impact statement by October 27, 2020 demonstrating how their program impacted Veterans
and/or their families. This form must be in the format of a digital document and emailed to vets.info@vets.ri.gov. This testimonial should highlight specific examples of successful implementation of the grant funding but must omit any personally identifiable information. Applicants agree to allow RIVETS use of this content for publication in its annual report or other collateral. Failure to provide this document by the deadline will disqualify you from future funding opportunities.

9. No grants will be awarded for the purchase, lease, or rent of office space, buildings, or land.

SECTION 4. PROPOSAL

1. The 14 funding categories listed on this RFP are the only categories under which programs can be funded. For every category checked, applicants must submit a separate application.

2. Review the Project Narrative and use it as a guide and checklist for the documents and format required for the application. All information listed in the Project Narrative is required for the application to be considered. If the applicant does not have or cannot produce the documentation requested, an explanation must be provided.

3. Awards expire at the end of the state fiscal year. For this FY 2021 grant period, monies must be spent by July 1, 2021.

4. Applicants awarded funds agree to allow RIVETS to conduct site visit inspections during regular business hours and understand the visits may be unannounced.

SECTION 5: EVALUATION AND SELECTION

1. Proposals shall be reviewed by a technical evaluation committee ("TEC") comprised of staff from State agencies.

3. RIVETS reserves the right to select the vendor(s) that it deems most qualified to provide the goods and/or services as specified herein; and, conversely, reserves the right to cancel the solicitation in its entirety in its sole discretion.

4. Proposals shall be reviewed and scored based upon the following criteria:

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Possible Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capability, Capacity, and Qualifications of the Offeror</td>
<td>20 Points</td>
</tr>
<tr>
<td>Staff Qualifications</td>
<td>10 Points</td>
</tr>
</tbody>
</table>
A general explanation of the criteria is provided:

a. Capability, Capacity, and Qualifications of the Offeror (20) – Please provide a detailed description of your organization’s background and experience delivering programs of this nature. The required financial statements will also be evaluated when determining your organization’s capacity.

b. Staff Qualifications (10) – Provide staff resumes/CVs and describe qualifications and experience of key staff who will be involved in delivering the services.

c. Work Plan & Budget (40) – Please describe in detail the framework within which services will be performed and specify how this grant money would be utilized.

d. Performance Metrics (15) – Provide an estimated number of Veterans, Service Members, and military-connected family members your program will impact and explain how you will track this number. In addition, applicants should define additional performance measures specific to their programs and explain their tracking process as appropriate.

e. Project Scalability (10) – Due to the highly competitive nature of this opportunity, your organization may be awarded a partial amount of your total request. Please describe the ability and method for your project to scale with differing funding amounts (for example, a project with a $10,000 funding request may be able to deliver 50% of initially quoted results if only $5,000 is awarded.)

f. Continued Program Support (5) – Applicants must describe how they will continue support for this program and the Veteran community at large after the expiration of this year’s grant funding.

5. Applicants may be required to submit additional written information or be asked to make an oral presentation before the TEC to clarify statements made in the proposal.
SECTION 6. QUESTIONS

1. Questions concerning this solicitation must be e-mailed to vets.info@vets.ri.gov no later than April 3, 2020, 12:00 p.m. No other contact with State parties is permitted.

2. Please reference RFP #072020 on all correspondence.

3. Questions should be submitted digitally or in writing in a Microsoft Word document in a narrative format with no tables.

4. Answers to questions received, if any, shall be posted on the RIVETS and Division of Purchasing websites as an addendum to this solicitation. It is the responsibility of all interested parties to monitor the RIVETS and Division of Purchasing websites for any procurement related postings such as addenda.

SECTION 7. PROPOSAL CONTENTS

1. Proposals shall include the following:

   a. One completed and signed RIVIP Bidder Certification Cover Form (included in the original copy only) downloaded from the Division of Purchases website at http://www.purchasing.ri.gov/bidopps/bidding/bidding.aspx. Do not include any copies in the Technical proposal.

   b. One completed and signed Rhode Island W-9 (included in the original copy only) downloaded from the Division of Purchases website at http://www.purchasing.ri.gov/rivip/publicdocuments/fw9.pdf. Do not include any copies in the Technical or Cost proposals.

   c. The Technical Proposal, which shall be the enclosed application form, to describe the qualifications and background of the applicant, proposed scope of work, and all information described in this solicitation.

2. Formatting of written documents.

   a. The project narrative shall be typed on white paper or presented in Microsoft Word or PDF formats.

   b. All pages on the project narrative are to be sequentially numbered in the footer, starting with number 1 on the first page of the narrative (this does not include the cover page or table of contents) through to the end, including all forms and
attachments. The Vendor’s name should appear on every page, including attachments. Each attachment should be referenced appropriately within the proposal section and the attachment title should reference the proposal section it is applicable to.

c. The budget and narrative shall be typed using the formatting described above.

d. Printed copies are to be bound with removable binder clips only. **Do not staple your application.**

**SECTION 8. PROPOSAL SUBMISSION**

1. Interested vendors must submit proposals to provide the goods and/or services covered by this RFP on or before the date and time listed on the cover page of this solicitation. Responses received after this date and time, as registered by the official time clock in the reception area of the RI Office of Veterans Services shall not be accepted.

2. Proposals should be emailed to vets.info@vets.ri.gov or hand-delivered in a sealed envelope marked “RFP # 072020” to:

   **Rhode Island Office of Veterans Services**
   **Attn: Technical Evaluation Committee Review (Veterans Service Grant)**
   **560 Jefferson Blvd, Suite 206**
   **Warwick, Rhode Island 02886**

3. Proposals received after the above-referenced due date and time shall not be accepted. Proposals misdirected to other State locations or those not presented to RIVETS by the scheduled due date and time shall be determined to be late and will not be accepted. Proposals faxed to RIVETS shall not be accepted.

**SECTION 9. CONCLUDING STATEMENTS**

1. Notwithstanding the above, RIVETS reserves the right to accept or reject any or all proposals, and to award in the State’s best interest.

2. Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

3. If an applicant is selected for an award, no work is to commence until a purchase order is issued by the Division of Purchases.
4. The State’s General Conditions of Purchase contain the specific contract terms, stipulations and affirmations to be utilized for the contract awarded for this RFP. The State’s General Conditions of Purchases can be found at the following URL:

https://www.purchasing.ri.gov/RIVIP/publicdocuments/ATTA.pdf
Projected Timeline

Below is the Veterans Service Grant projected timeline to assist the applicant with understanding the overall process and timely submittal of the application. Please note, the dates listed are estimates and subject to change. No work is to be completed until a PO is issued.

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>March 2, 2020</td>
<td>Posting Date</td>
</tr>
<tr>
<td>April 3, 2020</td>
<td>Deadline for vendor questions</td>
</tr>
<tr>
<td>April 10, 2020</td>
<td>Post addendum with responses to questions</td>
</tr>
<tr>
<td><em>April 17, 2020</em></td>
<td><em>Due Date of Proposals</em></td>
</tr>
<tr>
<td><em>April 17, 2020</em></td>
<td><em>(Bid opening date)</em></td>
</tr>
<tr>
<td>April 24, 2020</td>
<td>Technical Evaluation of Proposals</td>
</tr>
<tr>
<td>April 29, 2020</td>
<td>Evaluation team reviews and scores proposals</td>
</tr>
<tr>
<td>May 7, 2020</td>
<td>Evaluation team submits scoring memo to Director</td>
</tr>
<tr>
<td>May 31, 2020</td>
<td>Tentative Award Letter Issued</td>
</tr>
<tr>
<td>June 19, 2020</td>
<td>Due Date for Documents</td>
</tr>
<tr>
<td>June 19, 2020</td>
<td>All applicable documents received from Vendor. PO requested from Division of Purchasing.</td>
</tr>
<tr>
<td>July 1, 2020</td>
<td>PO Issued</td>
</tr>
<tr>
<td>July 1, 2020</td>
<td>All required documents received from Vendor. PO issued.</td>
</tr>
</tbody>
</table>
VETERANS SERVICE GRANT PROPOSAL APPLICATION (RFP # 072020)

Organizational Information:

Organization name: ____________________________________________________________
Address: ______________________________________________________________________
City: ___________________________ State: __________ Zip code: __________
Contact name: __________________________ Title: ________________
Phone number: _________________________ E-mail: ______________________________

Eligibility Requirements:

Please select a funding category:

☐ Veterans Living in Poverty
☐ Veterans Education
☐ Veterans Legal Services
☐ Veterans Transitional Assistance
☐ Veterans Transportation
☐ Veterans Financial Planning / Services
☐ Veterans Family Members / Caregivers
☐ Veterans Post Traumatic Stress Disorder (PTSD)/Agent Orange/Burn Pits
☐ Veterans Homelessness
☐ Veterans Disability Benefits
☐ Veterans Mortuary Affairs
☐ Veteran Long-Term Care
☐ Veterans Employment and Employment Training
☐ Other

Program Finances:

Funding Request: $________________

Note: Grant funding must be spent by July 1, 2021. Receiving an award does not imply any continuation of funding beyond the initial terms laid out in this RFP and the subsequent award agreement.

Program Summary:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Estimated number of Veterans, Service Members, and military-connected Family members your program will serve over the course of the program year:

____________________________________________________________________________

Have you received a Veterans Service Grant(s) previously? ☐ Yes/☐ No

If Yes

Previous Start/end Dates: ___________________________ - ___________________________
Amount Awarded: ___________________________
Amount Expended: ___________________________

Were you in compliance throughout the entire grant period? ☐ Yes/☐ No

If you were not in compliance, attach a written explanation.
**Project Narrative:**

The Project Narrative provides a format for your application and lists required details. It should be used as a guide and checklist for ensuring the application is submitted in the correct format and all documents requested are provided with the application. *If applicants do not complete and submit the required documents listed below, the application will be deemed incomplete and may be rejected.*

1. **Background & Qualifications**
   - A. Organization’s mission.
   - B. Describe current programs and activities.
   - C. Describe the population that your organization serves.
   - D. Describe the qualifications of key staff members who will participate in your proposed project.
   - E. Provide any additional qualifiers for the competency of your organization, such as media stories, testimonials, and letters of support.

2. **Work Plan & Budget**
   - A. Describe the program, project, or use for which grant funding is requested.
   - B. Describe the objective(s) of the program.
   - C. Describe in detail your plan for implementing your program, include any relevant research or previous work.
   - D. Provide plans, equipment lists, and other documents as may be required to show the type, structure, and general character of the program.
   - E. Describe the geographic area in RI that your program will serve.
   - F. Describe existing similar programs within the same geographic area.
   - G. Provide a program budget, with narrative and project costs estimates. The budget must thoroughly describe the intended expenditures of all grant funds and other project costs.
   - H. Describe the methods of financing the program. Include your methods of financing for program costs not covered by this grant.

3. **Performance Measures**
   - A. Provide the estimated number of Veterans, Service Members, and military-connected family members your program will serve over the course of the program year.
   - B. Provide any self-identified performance measures that your program will target and track.
C. Provide a plan for how you will track all performance measures, including number of Veterans, Service Members, and military-connected family members impacted.

D. Designate a staff member and provide contact information for performance metric reporting. This individual will be responsible for attending the mandatory performance review and for providing the mandatory 1-page testimonial.

4. **Project Scalability & Continued Support**

   A. Provide a scalability plan explaining if and how your program could operate under a partial funding amount. (For example, if your program was to receive 50% of the requested funding, could it deliver 50% of your initially estimated performance?) If your program cannot function unless it receives the fully requested amount, you must note this here. Note that inability to scale your project will result in full or partial loss of points in this category.

   B. Describe how the program will be supported after the termination of the grant.

5. **Financials**

   A. Provide audited financial statements for the last two fiscal years, or a Form 990. If it is not available, include unedited financial statements.

   B. Provide a current year’s operating budget to include both projected expenses and revenues.

   C. Provide a Capital budget.

   D. Provide a detailed list of grants applied for or currently have been awarded.

6. **Other required documents**

   A. Provide verification of the organization’s tax-exempt status under section 501(c)(3), 501(c)(4), or 509(a) of the IRS code.

   B. Is the grant request for durable equipment (e.g., non-consumables) over $1,500? If so, submit three (3) separate, competitive bids.

   C. Does the grant request include the use of a service provider? If so, submit three (3) quotes. If three quotes are not available, provide an explanation.

   D. Provide proof that the applicant is properly licensed to conduct service proposed.

   E. Do you have any outstanding obligations owed to the State of Rhode Island? If so, you must provide a statement.

   F. Provide a list of current chief officers/board members.

   G. Do any of the chief officers/board members have a relationship with a RIVETS employee? If so, provide a statement disclosing the relationship(s).

   H. Is the project in collaboration with other agencies? If so, include letters of agreement/understanding from the collaborating agencies.
Your organization must acknowledge and agree to the terms below. Failure to comply with these terms will disqualify you from current and future funding.

I certify that the Project Narrative □ is/☐ is not included and contains all the documents and information requested.

I certify that if an award is received my organization □ will/☐ will not comply with the performance measure review process.

I certify that if an award is received my organization □ will/☐ will not provide a one-page testimonial no later than October 27th 2020.

This information herein is certified as true and correct to the best of my knowledge.

Submitted by:

_________________________  ______________________
Name (Printed)                Title

_________________________
Signature                   Date