Guidelines
For
Submission of
Liberty Partnerships Program Proposals
For the Period
January 1, 2018 through August 31, 2022

Proposals are due by August 10, 2017
Introduction/Background: Through this RFP, New York State Education Department (NYSED) seeks to identify Institutions of Higher Education (IHE) that will create strong-school and community partnerships to deliver research-based programming to students enrolled in public and non-public schools that are identified as having a high risk of students dropping out of school.

As leaders in the educational community, IHE’s are encouraged to collaborate, design and implement programming that creates new strategies that influence the way schools work and the way we treat students as active participants in their own learning.

Legislative Authority: The Liberty Partnerships Program (LPP) was established in 1988 under Section 612, Subdivision 6 of the Education Law to address the significantly elevated, high school dropout rate among New York’s youth. The authorizing legislation stated, “the failure of many young New Yorkers to complete their secondary education limited their opportunity for a life of fulfillment, prevents them from advancing into postsecondary education and hinders the State’s efforts to provide a well-trained workforce for business and industry in New York.”

Purpose/Services: The purpose of the Liberty Partnerships Program is to provide for a continuity of services throughout a student’s progression through secondary school for those students who are identified as at-risk of dropping out. Services to be provided under this section may include skills assessment, tutoring, academic and personal counseling, family counseling and home visits, staff development activities for personnel with direct responsibility for such students, and mentoring programs.

Eligible Applicants: EDL § 612; “…awards shall be made on a competitive basis to degree-granting institutions of higher education or consortia of degree-granting higher education institutions in cooperation with school districts and not-for-profit community-based organizations. In addition, in areas of the state where no degree-granting institution or consortium of degree-granting institutions of higher education can provide appropriate services to students, the commissioner may award grants to not-for-profit community-based organizations in cooperation with school districts.”

Institutions that have already received an award notice resulting from the first LPP RFP for 2017-2022 are not eligible to apply for this round. Additionally, only not-for-profit applications are eligible to apply for this round. Each proposal must be submitted by at least one New York State eligible degree granting Institution of Higher Education (IHE) acting as the fiscal and project coordinator for a partnership with a Local Education Agency (LEA) and a Community Based Organization (CBO). The partnership may include additional LEAs, and IHEs and CBOs. Although SUNY and CUNY colleges
may use their respective “Research Foundation” as their fiscal agent if they receive a LPP award, the Research Foundation is not a degree-granting institution and therefore cannot be the applicant.

In a designated Regent’s Region of the state in which no IHE applies to provide appropriate services to eligible students, a not- for-profit community-based organization(s) in cooperation with a LEA may apply. The CBO would then apply as the lead agency with an IHE and LEA as identified partners. If such an application is made in a region where an IHE has applied, the CBO application would be deemed ineligible.

**Priorities**

The priorities shall include

1. Project services and activities that incorporate low student to staff ratios.
2. Projects in partnerships with colleges that demonstrate a high level of commitment to programs in such fields as human services, education, counseling, social work, psychology, sociology, and others which can identifiably foster college and career readiness in the student participant population, and involve faculty members and graduate students from these degree programs in working with LPP projects.
3. The priorities should also include the degree to which the institution proposes to cooperate with school districts and not for profit community based organizations to provide services and ensure continuity of such services until such students graduate from high school or receive a high school equivalency diploma.
4. Projects should provide a process for the inclusion and ongoing meaningful involvement of students, parents, deans, faculty, department chairs, and teachers in the implementation of the LPP project.

**Requirements**

The requirements shall include:

1. The IHE must have a partnership with at least one LEA that falls within the categories below:
   1) Be a school eligible for schoolwide programs under Title 1, Section 1114 of Every Student Succeeds Act, and the families of these students, or
   2) Be a school with at least 40 percent of students eligible for free or reduced priced lunch; and the families of these students or
   3) Be identified as a focus, struggling, persistently struggling and/or persistently dangerous schools or
   4) Be a rural school with students at risk.

**Priority Schools including Focus, Struggling,Persistently Struggling, and/or Persistently Dangerous Schools:**
The Department identified Priority Schools based on the following factors, as defined in the Elementary and Secondary Education Act (ESEA) waiver guidance:
• Schools based on the achievement of all student groups in terms of proficiency on the statewide assessments that are part of the state’s differentiated recognition, accountability and support system and are not making progress as defined by New York’s progress filters. The school also has shown a lack of progress for the all student groups over a number of years.

• Secondary schools with a Graduation Rate less than 60 percent for a number of years and not making progress, as defined by New York’s progress filters.

List of Priority Schools:


List of Persistently Dangerous Schools:


2. Identifying students who are at risk of dropping out of middle or secondary school.

3. Projects with an overall student enrollment of at least 200 students with at least 40 students enrolled at each partner school and/or LEA.

4. A project that involves volunteers, parents, and current or former LPP students.

5. A project that provides continuity of services throughout a student’s progression through middle or secondary school.

6. A project that provides the following services and activities:
   a. Skills assessment/Personal Learning Plans (PLPs)
   b. Social emotional assessment
   c. Tutoring
   d. Mentoring
   e. Academic, Personal, and Family Counseling and home visits

7. A project that provides staff development for personnel with direct responsibility for eligible students.

8. A project which has cooperative relationships with school districts and not for profit community based organizations to ensure continuity of services until students graduate from high school or receive a high school equivalency diploma.

9. A project which provides sufficient space and institutional resources consistent with other academic support programs on the campus for the effective operation of the project. This would include sufficient access to space needed to conduct the following: group meetings/workshops, conferencing, confidential academic and/or financial counseling, program administration, and tutoring services. Should a conflict regarding this provision
arise, LPP- SED shall investigate the situation and issue a written decision regarding the adequacy of the access and space.

**Student Risk Factors:**

According to EDL § 612; the student risk factors for being eligible for participation in LPP shall include: poor academic performance, poor attendance, discipline problems, teenage pregnancy or parenting, residence in a homeless shelter or temporary living arrangement, substance abuse, child abuse or neglect, limited English proficiency, or other identified factor affecting school performance.

**Important Dates:**

1. A RFP Conference by Webinar will be posted on July 14, 2017. Eligible applicants planning to apply for funding are invited to view the presentation at: [http://www.highered.nysed.gov/kiap/precoll/lpp/](http://www.highered.nysed.gov/kiap/precoll/lpp/)

2. All questions must be submitted to: [LPPRFP@nysed.gov](mailto:LPPRFP@nysed.gov) through the close of business on July 26, 2017.


4. A Notice of Intent (NOI) is required for submitting a complete application to ensure a timely and thorough review and rating process. A non-profit applicant’s NOI will also help to facilitate timely review of their prequalification materials. The notice of intent is a simple email notice stating your organization’s (use the legal name) intent to submit an application for this grant. Please also include your organization’s NYS Vendor ID. The due date is July 18, 2017. Please send the NOI to [LPPRFP@nysed.gov](mailto:LPPRFP@nysed.gov).

5. Applications are due electronically via the FluidReview portal and hardcopies must be posted marked by August 10, 2017 at 5pm.

6. Project Period: January 1, 2018 through August 31, 2022

7. Annual Operation Dates years 2-5: September 1 through August 31

**Funding:** Anticipated funding for the initial year of this cycle will be $781,617 per the 2017-2018 New York State budget, subject to the availability of funds.

Applicants should check the NYSED LPP website regularly for updates to this funding opportunity.
Application Submission:

The due date for electronic application submissions to the FluidReview portal is no later than August 10, 2017 at 5:00 p.m.

All applicants must submit complete applications electronically through the FluidReview portal by such time. Access to the portal, along with instructions for submission will be made available on August 3, 2017.

Online applications can be submitted by going to the website. Click “Sign Up” on the right-hand side of the page and you will be sent to the account creation page. Once you are on this page, you will be asked to specify a few details such as your email address and your desired password to create your account. An email will be sent to you, simply log into your email and click on the activation link to activate your account.

Once you have created and activated your account, you can log in and will be brought to your main dashboard and additional instructions (if provided by the FluidReview Administrator) as well as any tasks that you need to complete in order to submit your application. You will be able to sign in and out of the room as much or as little as desired.

To log back into your account in the future, go to the website address that will be made available via the Q &A post on August 3, 2017 and sign in using the email address and the password you (previously) created.

To complete a task, click on it. From there, follow the instructions as given to fill out an online form or to upload a document. Once you have completed a task, you may review it or download it for your files.

Once you have completed all of the required tasks, you must click on the Submit button at the bottom of the page to have your application sent on to the review portal. Here, you may also download the entire document for your files.

If you need any help or have any questions during the application process, please click on the question mark symbol in the upper right-hand side of your page.

Submission of Hard Copy of Application

Non-profit applicants must submit one original copy (both the narrative application and the budget/budget narrative) as well as a flash drive or CD-ROM containing a complete electronic copy (including attachments) of the proposal in one PDF file and a copy of the budget documents (FS-10, Composite Budget, and Budget Narrative) in separate PDF files, in a sealed envelope labeled “Liberty Partnerships Program Application GC#17-005”;

Non-profit applications must be sent to the address shown below:

NYS Education Department
Office of Postsecondary Access, Support and Success
Liberty Partnerships Program
Prequalification Requirement:

The State of New York has implemented a new statewide prequalification process (described in http://www.grantsreform.ny.gov/Grantees) designed to facilitate prompt contracting for not-for-profit vendors. All not-for-profit vendors are required to pre-qualify by the grant application deadline in order to be eligible for this grant. This includes all currently funded not-for-profit institutions that may have previously received an award and are in the middle of the program cycle. Please review the additional information regarding this requirement in the Prequalification for Individual Applications section of this RFP.
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I. INTRODUCTION

Through this RFP, New York State Education Department (NYSED) seeks to identify Institutions of Higher Education (IHE) that will create strong school and community partnerships to deliver research-based programming to students enrolled in public and non-public schools who are identified as having a high risk of dropping out of school.

II. BACKGROUND & PURPOSE

The Liberty Partnerships Program (LPP) was established in 1988 under Section 612, Subdivision 6 of the Education Law to address the significantly elevated, high school dropout rate among New York’s youth. The authorizing legislation stated “the failure of many young New Yorkers to complete their secondary education limited their opportunity for a life of fulfillment, prevents them from advancing into postsecondary education and hinders the State's efforts to provide a well-trained workforce for business and industry in New York. The Liberty Partnerships Program is included in the New York State Education Department’s Statewide Plan for Higher Education as part of its strategy to maximize the successful transition of middle and high school students, who are at-risk of dropping out of school, into graduates, fully prepared for the rigors of higher education and the competitive demands of a fluid workplace in a global economy.

This higher education initiative will grant awards on a competitive basis to eligible applicants that agree to deliver comprehensive, evidence based, results-driven programming designed to improve the abilities of at-risk middle and high school students to graduate from high school prepared for a successful transition into postsecondary education or onto a career path.

III. INSTITUTIONAL ELIGIBILITY

In accordance with § 612 of the Education Law, “awards shall be made on a competitive basis to degree-granting institutions of higher education or consortia of degree-granting higher education institutions in cooperation with school districts and not-for-profit community-based organizations.” Each proposal must be submitted by at least one New York State eligible degree granting Institution of Higher Education (IHE) acting as the fiscal and project coordinator for a partnership with a Local Education Agency (LEA). In order for any proposal to receive consideration, the applicant for your LPP RFP application must be the degree-granting institution. The Application Cover Page should list the degree-granting institution as the applicant. Although SUNY and CUNY colleges may use their respective “Research Foundation” as their fiscal agent if they receive a LPP award, the Research Foundation is not a degree-granting institution and therefore cannot be the applicant or a partner. The partnership must include an IHE, LEA and Community Based Organization (CBO). This item will be reviewed by the Office of Postsecondary Access, Support, and Success to ensure that the applicant meets this criterion prior to a review of the proposal on its merits. Any applicant who fails to meet this criterion will not have their proposal reviewed.

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1. Institutions that have already received an award notice resulting from the first LPP RFP for 2017-2022 are not eligible to apply for this round. Additionally, only not-for-profit applications are eligible to apply for this round.

2. In a region of the state in which no IHE applies to provide appropriate services to eligible students, a not-for-profit community-based organization(s) in cooperation with a LEA may apply. The not-for-profit CBO may apply; however, their application would only be considered if no Institution of Higher Education applies in that region.

3. Applicants must partner with the LEA(s) where participants are enrolled. A partnership signifies meaningful involvement in planning, as well as specific individual or joint responsibilities for program implementation. The application must contain signed Partnership Agreements with each partnering agency that describes their significant involvement in planning and program implementation. A sample Partnership Agreement is provided in Appendix 3 that may be used as a guide to develop customized agreements. The applicant is responsible for the performance of any service provided by the partners.

   An individual, agency, organization or other entity that only provides services described in the proposed program and is not involved in planning, is considered a sub-contractor, not a partner. Therefore, a Partnership Agreement is not required.

   Please also see Section VI, entitled “Partnership Arrangements for Liberty Partnership Applications.”

4. Letters of support from non-partner organizations or individuals will not be reviewed as part of the evaluation of the application.

IV. STUDENT PARTICIPANT ELIGIBILITY

   Eligible students will be:

   1. New York State residents;
   2. Enrolled in grades 5 through 12; or under 20 years old and enrolled in a state-recognized GED preparation program;
   3. Attending public, non-public, or home schools, or enrolled in a state-recognized GED preparation program in New York State; and
   4. Each participant must be identified as being at risk of dropping out of school as measured by one or more of the following factors:
      a. Unsatisfactory academic performance;
      b. Inconsistent school attendance or truancy;
      c. History of Behavior/discipline problems;
      d. History of family/peers dropping out of school;
      e. Negative change in family circumstances;
      f. History of child abuse or neglect;
      g. Homeless/resident in a shelter or foster care;
h. History of substance abuse;

i. Limited-English proficiency;

j. Teenage pregnancy and/or parenting;

k. Negative peer pressure; or

l. Other specific documented factors- (should not account for more than 10% of student enrollment)

V. PROPOSAL FOCUS AND PROGRAM SERVICE REQUIREMENTS

Successful proposals will provide for the implementation of a five-year project plan, with a Start Date of January 1, 2017, and an End Date of August 31, 2022, that delivers 12 months of structured programming of support services and counseling activities facilitating the following outcomes to benefit eligible students:

1. A program model that is either:

   a. A School based model
   b. An afterschool model
   c. A model which is a combination of the two

2. Required services include skills assessment, tutoring, academic and personal counseling, family counseling and home visits, staff development activities for personnel with direct responsibility for such students, and mentoring programs.

3. Projects must offer at least a four-week summer component in each year of the cycle. Each LPP participant must be offered a summer program opportunity at least once during the funding cycle. The summer component must have an enrollment of at least 40 students.

4. Ensure that participants have increased persistence to complete high school with sustained high academic achievement.

5. Ensure that participants are prepared for successful transition into postsecondary education and the workforce.

6. Projects must be in coordination and partnership with at least one LEA and at least one Community Based Organization.

7. Be in accordance with the IHE’s mission and/or Master Plan.
VI. PARTNERSHIP ARRANGEMENTS FOR LIBERTY PARTNERSHIP APPLICATIONS

Eligible applicants will form a partnership with a local educational agency. In addition to a local educational agency, the eligible applicant must also include a not-for-profit community based organizations (CBO) in the partnership. In order to be a qualifying partnership, the partnership must meet the following requirements:

1. Consist of an eligible lead applicant (IHE*), a local educational agency (LEA), and a not-for-profit CBO.

2. The partnership must be evidenced by a signed partnership agreement signed by all parties to the agreement. **The completed and signed Partnership Agreement must be submitted with the application. If an agreement is not submitted, the application will be disqualified. If a partnership agreement is not signed by all parties to the agreement, it will not be evaluated for scoring purposes and the application will be disqualified.**

3. Contract awards granted to applicants will be prepared in the name of the applicant. The applicant will act as the fiscal agent. Although SUNY and CUNY colleges may use their respective “Research Foundation” as their fiscal agent if they receive a LPP award, the Research Foundation is not a degree-granting institution and therefore cannot itself be the applicant. In the event a SUNY or CUNY College wins an award and that college has chosen to use the Research Foundation as their fiscal agent, the standard process is that a grant contract is written for ‘RF <SUNY/CUNY> on behalf of <specific SUNY/CUNY College>.’ Ultimately, the College bears responsibility for program operations, for fiscal decisions, and fiscal and performance reports. The applicant must be the principal communicant with NYSED regarding the LPP project;

4. A sample partnership agreement is attached as Appendix 3. The purpose of the sample is to assist applicants in the development of their partner agreements. However, it must be adapted to the applicant’s particular program. Otherwise, it may be an indicator of a weak partnership agreement. Specific requirements regarding student data sharing must be included in the partnership agreement with the provision that each partner adheres to required confidentiality restrictions regarding the public disclosure of any protected information.

5. The partnership agreement must contain the following elements:

   (a) Designate the lead IHE to serve as the applicant and fiscal agent for the grant.

   (b) Specify all of the services each of the partners is required to provide and when they are expected to do it.

   (c) Require the sharing of sufficient student and operational data to ensure that appropriate services are provided to eligible students, and that such services can be evaluated as to their educational impact.

   (d) **Is signed by all of the parties to the agreement when the application is submitted.**
6. The applicant must receive and administer the grant funds and submit the required reports to account for the use of grant funds;

7. The applicant must be an active member of the partnership.

8. The applicant/fiscal agent cannot act as a flow-through for grant funds to pass to other partners and third parties. The applicant should provide a minimum of 55% of direct cost services to the program, meaning at least 55% of the annual budget should be allocated to line items other than Purchased Services, including BOCES Purchased Services.

9. The applicant is PROHIBITED from sub-granting funds to other recipients. A sub-grant occurs when the applicant delegates programmatic decision making or responsibility for achieving program goals to a third party. The applicant is fully responsible for compliance with program requirements and achievement of program objectives.

10. The applicant is permitted to sub-contract for services with other partners or consultants to provide services that the applicant cannot provide itself but are part of the program objective.

11. The applicant shall take full responsibility for the acts and omissions of its partners and subcontractors. Nothing in the partnership agreement or subcontract shall impair the rights of NYSED under its agreement with the applicant. No contractual relationship shall be deemed to exist between the partner/subcontractor and NYSED.

12. The applicant is responsible for the performance of any service provided by the partners, consultants, or other organizations and must coordinate how each entity plans to participate.

VII. PUBLIC RELATIONS/ATTRIBUTIONS OF FUNDING

In order to ensure the continued support and the commitment of resources to State-funded Liberty Partnerships Program projects, there must be public awareness of the program’s positive impact on the lives of project participants and their families, schools, and communities. Positive publicity and community awareness also help to ensure that those who are eligible and who could benefit from participation are informed of the project’s existence.

To facilitate public awareness, all funded Liberty Partnerships Program projects are required to ensure that all public relations materials, websites, and program related activities acknowledge that the project and its activities are supported, in whole or in part, by a grant from the New York State Education Department. In addition, when local, statewide, or national media report on the project’s success or on honors received by students or staff, New York State Education Department funding must be acknowledged.

In addition, the project director should submit copies of all local, statewide, or national media stories about the project and/or the project participants and staff to the State Education Department at the following address:

New York State Education Department
Office of Postsecondary Access, Support and Success
Questions about this policy may be directed to the appropriate project liaison. The foregoing publicity requirements are subject to any additional terms and conditions that are defined in the master grant contract.

VIII. NYSED’S RESERVATION OF RIGHTS

NYSED reserves the right to:
1. Reject any or all proposals received in response to the RFP;
2. Withdraw the RFP at any time, at the agency’s sole discretion;
3. Make an award under the RFP in whole or in part;
4. Disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP;
5. Seek clarifications of proposals;
6. Use proposal information obtained through site visits, management interviews and the state’s investigation of a bidder’s qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency’s request for clarifying information in the course of evaluation and/or selection under the RFP;
7. Prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it may become available;
8. Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;
9. Change any of the scheduled dates;
10. Waive any requirements that are not material;
11. Negotiate with the successful bidder within the scope of the RFP in the best interests of the state;
12. Conduct contract negotiations with the next responsible bidder, should the agency be unsuccessful in negotiating with the selected bidder;
13. Utilize any and all ideas submitted in the proposals received;
14. Unless otherwise specified in the solicitation, every offer is firm and not revocable for a period of 90 days from the bid opening;
15. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer’s proposal and/or to determine an offerer’s compliance with the requirements of the solicitation;

16. To request best and final offers.

IX. VENDOR RESPONSIBILITY, M/WBE, AND ADDITIONAL REQUIREMENTS

Vendor Responsibility

State law requires that the award of state contracts be made to responsible vendors. Before an award is made to a not-for-profit entity, a for-profit entity, a private college or university or a public entity not exempted by the Office of the State Comptroller, NYSED must make an affirmative responsibility determination. The factors to be considered include: legal authority to do business in New York State; integrity; capacity—both organizational and financial; and previous performance. Before an award of $100,000 or greater can be made to a covered entity, the entity will be required to complete and submit a Vendor Responsibility Questionnaire. School districts, Charter Schools, BOCES, public colleges and universities, public libraries, and the Research Foundation for SUNY and CUNY are some of the exempt entities. For a complete list, see: [http://www.osc.state.ny.us/vendrep/resources_docreq_agency.htm](http://www.osc.state.ny.us/vendrep/resources_docreq_agency.htm).

NYSED recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at [http://www.osc.state.ny.us/vendrep/info_vrsystem.htm](http://www.osc.state.ny.us/vendrep/info_vrsystem.htm) or go directly to the VendRep System online at [https://portal.osc.state.ny.us](https://portal.osc.state.ny.us).

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller’s Help Desk at 866-370-4672 or 518-408-4672 or by email at [ciohelpdesk@osc.state.ny.us](mailto:ciohelpdesk@osc.state.ny.us).

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website [www.osc.state.ny.us/vendrep](http://www.osc.state.ny.us/vendrep) or may contact NYSED or the Office of the State Comptroller’s Help Desk for a copy of the paper form.

Subcontractors:

For vendors using subcontractors, a Vendor Responsibility Questionnaire and a NYSED vendor responsibility review are required for a subcontractor where:

- the subcontractor is known at the time of the contract award;
• the subcontractor is not an entity that is exempt from reporting by OSC; and
• the subcontract will equal or exceed $100,000 over the life of the contract

**MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISE (M/WBE)**

**Participation Goals Pursuant to Article 15-A of the New York State Executive Law**

*The following M/WBE requirements apply when an applicant submits an application for grant funding that exceeds $25,000 for the full grant period.*

*All forms referenced here can be found in the M/WBE Documents section at the end of this RFP.*

All applicants are required to comply with NYSED’s Minority and Women-Owned Business Enterprises (M/WBE) policy. Compliance can be achieved by one of the three methods described below. Full participation by meeting or exceeding the M/WBE participation goal for this grant is the preferred method.

M/WBE participation includes services, materials, or supplies purchased from minority and women-owned firms certified with the NYS Division of Minority and Women Business Development. Not-for-profit agencies are not eligible for this certification. For additional information and a listing of currently certified M/WBEs, see [https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=4687](https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=4687)

The M/WBE participation goal for this grant is 30% of each applicant’s total discretionary non-personal service budget each year of the grant. Discretionary non-personal service budget is defined as total budget, excluding the sum of funds budgeted for:

1. Direct personal services (i.e., professional and support salaries) and fringe benefits; and
2. Rent, lease, utilities and indirect costs, if these items are allowable expenditures.

The M/WBE Goal Calculation Worksheet is provided for use in calculating the dollar amount of the M/WBE goal for this grant application.

All requested information and documentation should be provided at the time of submission. If this cannot be done, the applicant will have thirty days from the date of notice of award to submit the necessary documents and respond satisfactorily to any follow-up questions from the Department. Failure to do so may result in loss of funding.
METHODS TO COMPLY

An applicant can comply with NYSED’s M/WBE policy by one of three methods:

1. Full Participation - This is the preferred method of compliance. Full participation is achieved when an applicant meets or exceeds the participation goals for this grant.

   COMPLETE FORMS:
   M/WBE Goal Calculation Worksheet
   M/WBE Cover Letter
   M/WBE 100 Utilization Plan
   M/WBE 102 Notice of Intent to Participate

2. Partial Participation - Partial Request for Waiver - This is acceptable only if good faith efforts to achieve full participation are made and documented, but full participation is not possible.

   COMPLETE FORMS:
   M/WBE Goal Calculation Worksheet
   M/WBE Cover Letter
   M/WBE 100 Utilization Plan
   M/WBE 101 Request for Waiver
   M/WBE 102 Notice of Intent to Participate
   M/WBE 105 Contractor’s Good Faith Efforts

3. No Participation - Request for Complete Waiver - This is acceptable only if good faith efforts to achieve full or partial participation are made and documented, but do not result in any participation by M/WBE firm(s).

   COMPLETE FORMS:
   M/WBE Goal Calculation Worksheet
   M/WBE Cover Letter
   M/WBE 101 Request for Waiver
   M/WBE 105 Contractor’s Good Faith Efforts

GOOD FAITH EFFORTS
Applicants must make a good faith effort to solicit NYS certified M/WBE firms as subcontractors and/or suppliers to achieve the goals for this grant. Solicitations may include, but are not limited to: advertisements in minority and women-centered publications; solicitation of vendors found in the NYS Directory of Certified Minority and Women-Owned Business Enterprises (see https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=4687); and the solicitation of minority and women-oriented trade and labor organizations.

Good faith efforts include actions such as setting up meetings or announcements to make M/WBEs aware of supplier and subcontracting opportunities, identifying logical areas of the grant project that could be subcontracted to M/WBE firms, and utilizing all current lists of M/WBEs who are available for and may be interested in subcontracting or supplying goods for the project.

Applicants should document their efforts to comply with the stated M/WBE goals and submit this with their applications as evidence. Examples of acceptable documentation can be found in form M/WBE 105, Contractor’s Good Faith Efforts. NYSED reserves the right to reject any application for failure to document “good faith efforts.”

REQUEST FOR WAIVER

When full participation cannot be achieved, applicants must submit a Request for Waiver (M/WBE 101). Requests for Waivers must be accompanied by documentation explaining the good faith efforts made and reasons they were unsuccessful in obtaining M/WBE participation.

NYSED reserves the right to approve the addition or deletion of subcontractors or suppliers to enable applicants to comply with the M/WBE goals, provided such addition or deletion does not impact the technical proposal and/or increase the total budget.

All payments to Minority and Women-Owned Business Enterprise subcontractor(s) should be reported to the NYSED M/WBE Program Unit using the M/WBE 103 Quarterly M/WBE Compliance Report. This report should be submitted on a quarterly basis and can be found at www.oms.nysed.gov/fiscal/MWBE/forms.html.

NYSED’s M/WBE Coordinator is available to assist applicants in meeting the M/WBE goals. The Coordinator can be reached at MWBE@mail.nysed.gov.

Equal Employment Opportunity Reporting (EEO) Pursuant to Article 15-A of the New York State Executive Law
Applicants must complete and submit form EEO 100: Staffing Plan.

PREQUALIFICATION FOR INDIVIDUAL APPLICATIONS

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for proposals to be evaluated. Information on these initiatives can be found on the Grants Reform Website (http://www.grantsreform.ny.gov/).

Proposals received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the proposal due date of 5:00 PM on August 10, 2017 cannot be evaluated. Such proposals will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor Prequalification Manual (http://www.grantsreform.ny.gov/sites/default/files/docs/VENDOR_POLICY_MANUAL_V.2_10.10.13.pdf) on the Grants Reform Website details the requirements and an online tutorial (http://grantsreform.ny.gov/youtube) are available to walk users through the process.

1) Register for the Grants Gateway.

- On the Grants Reform Website, download a copy of the Registration Form for Administrator (http://grantsreform.ny.gov/sites/default/files/RegistrationFormforAdministratorfillable.pdf). A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

- If you have previously registered and do not know your Username please email grantsreform@budget.ny.gov. If you do not know your Password please click the Forgot Password (https://grantsgateway.ny.gov/IntelliGrants_NYSGG/PersonPassword2.aspx?Mode=Forgot) link from the main log in page and follow the prompts.

2) Complete your Prequalification Application.
Log in to the Grants Gateway (https://grantsgateway.ny.gov/IntelliGrants_NYSGG/login2.aspx). If this is your first time logging in, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.

Click the Organization(s) link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A Document Vault link will become available near the top of the page. Click this link to access the main Document Vault page.

Answer the questions in the Required Forms and upload Required Documents. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Proposal.

Specific questions about the prequalification process should be referred to your agency representative at prequal@mail.nysed.gov or to the Grants Reform Team at grantsreform@budget.ny.gov.

3) Submit Your Prequalification Application

After completing your Prequalification Application, click the Submit Document Vault Link located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to In Review.

If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.

Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.

Workers’ Compensation Coverage and Debarment

1. New York State Workers’ Compensation Law (WCL) has specific coverage requirements for businesses contracting with New York State and additional requirements which provide for the debarment of vendors
that violate certain sections of WCL. The WCL requires, and has required since introduction of the law in 1922, the heads of all municipal and State entities to ensure that businesses have appropriate workers’ compensation and disability benefits insurance coverage prior to issuing any permits or licenses, or prior to entering into contracts.

2. Workers’ compensation requirements are covered by WCL Section 57, while disability benefits are covered by WCL Section 220(8). The Workers’ Compensation Benefits clause in Appendix A – STANDARD CLAUSES FOR NEW YORK STATE CONTRACTS states that in accordance with Section 142 of the State Finance Law, a contract shall be void and of no force and effect unless the contractor provides and maintains coverage during the life of the contract for the benefit of such employees as are required to be covered by the provisions of the WCL. Under provisions of the 2007 Workers’ Compensation Reform Legislation (WCL Section 141-b), any person, or entity substantially owned by that person: subject to a final assessment of civil fines or penalties, subject to a stop-work order, or convicted of a misdemeanor for violation of Workers’ Compensation laws Section 52 or 131, is barred from bidding on, or being awarded, any public work contract or subcontract with the State, any municipal corporation or public body for one year for each violation. The ban is five years for each felony conviction.

3. **Proof of Coverage Requirements**
   a. The Workers’ Compensation Board has developed several forms to assist State contracting entities in ensuring that businesses have the appropriate workers’ compensation and disability insurance coverage as required by Sections 57 and 220(8) of the WCL.

   Please note – an ACORD form is not acceptable proof of New York State workers’ compensation or disability benefits insurance coverage.

4. **Proof of Workers’ Compensation Coverage**
   a. To comply with coverage provisions of the WCL, the Workers’ Compensation Board requires that a business seeking to enter into a State contract submit appropriate proof of coverage to the State contracting entity issuing the contract. For each new contract or contract renewal, the contracting entity must obtain ONE of the following forms from the contractor and submit to OSC to prove the contractor has appropriate workers’ compensation insurance coverage:

   b. Form C-105.2 – Certificate of Workers’ Compensation Insurance issued by private insurance carriers, or Form U-26.3 issued by the State Insurance Fund; or

   c. Form SI-12 – Certificate of Workers’ Compensation Self-Insurance; or Form GSI-105.2 Certificate of Participation in Workers’ Compensation Group Self-Insurance; or

   d. CE-200 – Certificate of Attestation of Exemption from NYS Workers’ Compensation and/or Disability Benefits Coverage.
5. **Proof of Disability Benefits Coverage**

To comply with coverage provisions of the WCL regarding disability benefits, the Workers’ Compensation Board requires that a business seeking to enter into a State contract must submit appropriate proof of coverage to the State contracting entity issuing the contract. For each new contract or contract renewal, the contracting entity must obtain ONE of the following forms from the contractor and submit to OSC to prove the contractor has appropriate disability benefits insurance coverage:

a. Form DB-120.1 - Certificate of Disability Benefits Insurance; or
b. Form DB-155- Certificate of Disability Benefits Self-Insurance; or
c. CE-200 – Certificate of Attestation of Exemption from New York State Workers’ Compensation and/or Disability Benefits Coverage.

For additional information regarding workers’ compensation and disability benefits requirements, please refer to the New York State Workers’ Compensation Board website at:

http://www.wcb.ny.gov/content/main/Employers/busPermits.jsp

Alternatively, questions relating to either workers’ compensation or disability benefits coverage should be directed to the NYS Workers’ Compensation Board, Bureau of Compliance at (518) 486-6307.

**X. NOT-FOR-PROFIT (NFP) PROMPT CONTRACTING**

Chapter 166 of the Laws of 1991 added Article XI-B (The Prompt Contracting Law) to the State Finance Law promoting prompt contracting with NFP organizations.

More specifically, the Prompt Contracting Law sets time frames for processing contracts and related documents; provides for written directives, waivers of interest, and advances/loans to Not-for-Profits (NFPs) when those time frames cannot be met; and requires interest payments to NFPs when contract payments are late due to untimely processing of contracts and no advance or loan was provided. For information on loans for NFPs from the Short-Term Revolving Loan Fund, refer to Bulletin A-268. This bulletin explains the procedure to follow when contracting with NFPs.

Chapter 648 of the Laws of 1992 made several changes to Article XI-B. The 1992 revisions provided more reasonable time frames for processing local grant awards and federally funded contracts; allowed for State agencies and NFPs to waive interest payments under certain circumstances; eliminated interest penalties for contracts executed and funded in whole or in part for services rendered in a prior fiscal year; and limited the amount of time a State agency may suspend time frames to four and one-half months.
Chapter 292 of the Laws of 2007 added further amendments to Article XI-B. The 2007 amendments prohibit State agencies from requiring NFPs, as a prerequisite of the execution of a contract, to waive claims for interest that would otherwise be due; provide that a contract is deemed to continue, and the contract remains in effect when a State agency does not timely notify an NFP of an intent to terminate the contract; require that any waivers of interest be subject to the Office of the State Comptroller’s (OSC’s) approval and provide for the calculation and payment of interest to NFPs when OSC non-approves a waiver of interest; require State agencies to report prompt contracting information to OSC for inclusion in annual reports; and expand the NFP contracting advisory committee to sixteen members, require meetings at least quarterly, and expand the scope of the committee’s responsibility.

A key objective of the Prompt Contracting Law is to expedite the contract process, and corresponding payments with NFPs to avoid service interruptions and financial hardships for these organizations. OSC advises that State agencies take measures to ensure compliance with the requirements of the Prompt Contracting Law. To this end, State agencies should maximize their use of the standard contract boilerplate, including simplified renewal documents, written directives, and valid waivers of interest when contracting with NFPs.

State agencies utilizing waivers of interest should ensure that the waiver is signed and dated by the NFP, includes an explanation for the retroactive contract start date, and satisfies required time frames set by the law.

Note: The Prompt Contracting Law requirements pertain to all grant contracts with NFPs, including those that fall below the $50,000 threshold for the Comptroller’s prior approval.

Source: OSC A-Bulletin A-316 (update effective November 18, 2009)

XI. FUNDING LIMITATIONS

The specific amount of awards depends upon the legislative appropriation and the review and approval of an institution's application for funding by the State Education Department. While these guidelines call for a five-year narrative proposal, applicants are required to submit a one year budget for the period January 1, 2018 - August 31, 2018 using Form FS-10.

Funding in years two through five is dependent on satisfactory performance, legislative appropriation, and the submission of an updated proposed project budget approved by SED.
According to State Education Law § 612 “A grant to a recipient of an award under this section shall not exceed the amount of three hundred thousand dollars for any grant year, provided that a recipient may receive a grant in excess of such amount at the rate of twelve hundred fifty dollars for each student, in excess of two hundred forty students, who is provided compensatory and support services by the recipient during such grant year...” To comply with Education Law § 612 (4) (b), grants in excess of $300,000 are subject to additional limitations. First, the maximum per student budget submission is $1,250. Second, there will be an automatic statutory budget adjustment to these grants in the event the grantee does not maintain sufficient enrollment to maintain a $1,250 cap per student for budgeted amounts in excess of $300,000 in any grant year.

For the period January 1, 2018 through August 31, 2018, the maximum award will be $350,000 for projects that propose to serve at least 280 students at a rate of $1,250 per participant. The minimum award amount will be $81,617 to serve at least 65 students.

The entire project budget is subject to adjustment on a proportional basis if the project does not attain enrollment goals by the interim report. For example, if the actual roster is 94% of the projected number, the grantees’ budget may be reduced by 6% in the year of the deficiency.

Each funded project is expected to meet its budgeted enrollment figure. If actual enrollment is less than 95% of the budgeted enrollment, the project will be placed on probation in the next project year. Projects may have their grant withdrawn if they fail to maintain satisfactory progress to maintain their budgeted enrollment figure. See “Probation/ Grant Suspension” section of the RFP.

**Note:** Grant funds must be expended on allowable activities in accordance with the approved budget and in accordance with the applicable cost principles. Further, Budget allocations in future years are subject to review.

All funding requests meeting the eligibility criteria will be reviewed at the time of submission of an application. If specific costs are deemed unreasonable or unnecessary for an LPP program, NYSED in collaboration with the proposed LPP Project Director will modify the proposed budget to include only allowable expenses.

**Additional Funding for the Program**

For an increase in available funding:

A. If new or additional funding becomes available in years 1 or 2, and NYSED chooses to distribute this funding to applicants of this current RFP, NYSED will allocate the funds in this order by:
   i. Making whole any funded programs that have received a partial award;
ii. Approving awards, in rank order, for eligible applicants who received passing scores, but who did not rank high enough to receive the initial funding. If there are funds remaining that will not fully support the next highest-ranking application, that applicant will be given the opportunity to receive a partial award so long as the award is not less than $81,617.

iii. Allocating funds among already awarded programs to serve additional students. NYSED will offer awarded programs the opportunity to serve additional students based on the per student maximum request amounts outlined in this Funding Limitations section of the RFP. This opportunity will be offered to all awarded programs that have not fallen below 95% of their enrollment goal, according to the most recently submitted rosters of students (see the Shortfalls in Enrollment Goals section below). Maximum request amounts will be established by distributing funding proportionally (based on total annual budget) to those institutions that accept the opportunity to serve additional students.

Such plan will be subject to review and approval by the Office of the State Comptroller.

B. In the event there are remaining funds in year 1 and 2 (after making awards described in the preceding paragraph) or if additional funds become available in years 3-5, NYSED may allocate the grant funds in a manner that best serves programs needs as determined by the Department. Such plan will be subject to review and approval by the Office of the State Comptroller.

Reduced Funding for the Program

Should the enacted NYS budget reduce the funds available for the Liberty Partnerships Program, a proportional reduction will be borne by all programs based upon the proportion of the funds received and the amount of the reduction. Impacted projects could reduce their service population commensurate with the reduction in funding.

XII. BUDGET

A. Use of Funds:

According to Education Law § 612 ... allowable costs under this program shall include, ... salaries of program personnel, including graduate student stipends; transportation costs for students and program personnel; instructional materials; reimbursement to school districts for release time granted to employees while participating in the planning and development of activities funded pursuant to this section; training of program personnel; costs related directly to program services, including summer and weekend activities; and administrative costs directly attributable to the program.

1. Activities funded under a LPP award will be administered pursuant to a written contract between NYSED and the funded IHE.

   a. Adjustments to an award amount will occur if items within the proposed budget are deemed to be non-allowable or inappropriate.
2. Delivery of services may include partnership goods and services by the IHE with LEAs, not-for-profit, and/or community-based organizations.

3. No LPP funds may be used for purposes which have not been described in the proposal. Amendments to the proposal during the course of the year that involve changes in the manner in which LPP funds are expended must have prior written approval from NYSED.

4. Program changes impacting service delivery and project continuity must have prior written approval from NYSED-LPP.

B. Allowable Expenses:

Allowable direct costs include the following:

1. Program administration, including as allowable: professional and non-professional salaries, fringe benefits, staff travel, purchased services/consultant services, cost sharing for required fingerprinting for LPP staff up to 50%, required membership fees, LPP regional and statewide professional development; reimbursement for “release time” for school personnel engaged in program planning and implementation reported as a purchased service.

2. Program activities, including as allowable: participant field trips, LPP student conference expenses, program achievement/awards, project brochures/materials and promotional activities, and activities fees for participants, standardized tests/instruction fees for participants, expenses related to program attendance such as participant transportation, and evaluation materials and activities. Out of state travel requires prior approval by SED.

3. Student classroom supplies, needed for direct academic remediation and skill development.

4. Participation in a statewide evaluation program. For the purpose of this RFP, the required independent evaluator is a vendor (purchased services), NOT a partner.

5. Administrative and instructional supplies, materials, and equipment and durable goods; including instructional or administrative computer software and computers, lab equipment, etc., which are used principally in the operation and administration of the LPP project.
   a. When equipment or durable goods are purchased with LPP funds, it is the responsibility of the institution to ensure that the LPP Durable Goods Inventory Form, found in Appendix 4, is completed and that a copy is submitted to NYSED.
   b. If a program closes, any equipment or durable goods purchased with LPP-NYSED funds must be released for transfer to another LPP program so that equipment or durable goods continue to support LPP students. NYSED staff will assist in coordinating the accountability and transfer of such equipment or durable goods.
C. Indirect Expenses:
For eligible IHE’s, funds for indirect expenses provided by the LPP award may not exceed eight percent (8%) of total LPP grant contract expenditures. Indirect costs cannot be charged on the following items:

1. Equipment purchases
2. Stipends/honoraria
3. Tuition
4. The amount exceeding $25,000.00 of each subcontract

Costs: (In your application it is helpful if you BOLD TYPE the cost(s) not included in the calculation of the modified direct cost base in Code 49 of the FS-10).

For eligible not-for-profit community based organizations, an indirect cost rate of up to 2.6% may be used for indirect expenses. Such organizations may apply to the Department’s Grants Finance Unit for a higher indirect cost rate for their project. Contact NYSED’s Grants Finance Unit for more information. For profit organizations are not allowed to claim indirect costs on grants/grant-contracts.

D. Fringe Benefits:

The rate for fringe benefits cannot exceed the actual rate paid by the institution for benefits actually received by the covered employee. As only administrative costs directly attributable to the program are allowed by law, it is not permissible to deduct fringe benefits costs for employees who do not receive the benefits. For CUNY and SUNY institutions, the maximum rate that will be considered is the rate allowed by the New York State Comptroller’s Office (OSC).

E. Non-Allowable Activities and Costs:
1. Liberty Partnerships Program funds are intended to establish new efforts or to enrich or expand existing ones. They may not be used to supplant funding of other existing efforts and should not cause the reduction of instructional hours or any other service LPP students would otherwise receive.
2. LPP funds may not be used for purposes other than those described in the approved grant contract.
3. Flow-through funds are not permitted. A flow through is defined as an entity that passes funds on to another entity without providing the primary service for which the funds were provided.
4. Interest and finance charges incurred by the grant contract recipient are not allowed for reimbursement.
5. Funds cannot be used to pay for student’s participation in program activities, except as provided in the description of allowable costs.
6. LPP funds cannot be used to pay for the salary or stipend of the Liberty Partnerships Program Director’s Supervisor or someone designated as a Principal Investigator for the grant contract.

7. LPP funds cannot be used to purchase or rent space to house the Liberty Partnerships Program.

F. LPP Payment Schedule:

Activities funded under a LPP award will be administered pursuant to a written contract between NYSED and the funded applicant institution or applicant lead institution of a consortium. An institution awarded a contract and accepting LPP funds must submit an annual budget and budget narrative, for the first year and each succeeding year in a form and manner prescribed by LPP-SED. All FS-10, FS10A, FS25, and FS10F, must include an original signature, in blue ink, of the Campus President or individual authorized in writing to sign on behalf of the Campus President. If using a designee, a letter from the Campus President must accompany the initial FS10 designating that individual as the authorized signatory. Regardless of the use of a designee, the Campus President is still ultimately responsible for the proposed and actual expenditures of New York State funds.

Note: The Grant Contract is approved when it has been signed by the IHE’s Chief Executive Officer, the New York State Education Department, the Office of New York State Attorney General, and the New York State Office of the State Comptroller.

G. Transfer of Funds:

Failure to follow these procedures may result in the disallowance of all expenditures not previously approved by LPP-SED.

1. Consistent with the Fiscal Guidelines for Federal and State Grants, budget transfers must be requested using Form FS-10-A: Proposed Amendment for a Federal or State Project.

2. All FS-10-A forms must be submitted anytime between the start date of any funding year and June 30th.

3. An amendment that would result in a transfer of funds among program activities or budget cost categories that does not affect the amount, consideration, scope or other terms of such contract may still be subject to the approval of the Attorney General and the Office of the State Comptroller where the amount of such modification is, as a portion of the total value of the contract, equal to or greater than ten percent for contracts of less than five million dollars, or five percent for contracts of more than five million dollars; and, in addition, such amendment may be subject to prior approval by the applicable State Agency as detailed in the contract.

4. Funds must not be expended until the budget/contract amendment has been approved in writing.

Note: Failure to follow the procedures outlined above may result in the disallowance of all expenditures not previously approved by SED.
H. Allocations to Collaborating Agencies:

Activities funded through the Liberty Partnerships Program will be administered pursuant to a written grant contract between the State Education Department and the selected applicant. Funding requests for the delivery of direct student services may include allocations by the selected applicant with collaborating agencies including: the LEA(s), the IHE, partner not-for-profit community-based organizations, partner schools, and other postsecondary education institutions.

I. Grant Contract Amendments:

The grant contract may be amended with the consent of the State Comptroller. Amendments to the grant contract which involve increases in dollar amount, changes in scope or in the way LPP funds are expended must have prior written approval from the same. Only expenses incurred for activities included in the approved or amended budget will be reimbursed by the State.

J. Records Retention:

a. All LPP related institutional records, including student and fiscal records, are subject to audit by the State Education Department and the Office of the State Comptroller, or an agency designated by one of the above.

b. Fiscal records, including those identifying an expense of LPP funds, must be maintained for six full years, or longer if required by institutional policy or practice.

c. Student records must be maintained for six years after the student graduates or exits the program, whichever is later.

d. Audit or litigation will "freeze the clock" for records retention purposes. Supporting documentation related to an issue under audit or litigation must be retained until resolved or the above general rule for record retention, whichever is longer.

K. Charging For Project Services:

Projects must be equally accessible to all students targeted for services. Projects may not prohibit any family from participating in LPP programming due to their financial situation. The priority of the project is to deliver a continuum of twelve-month programs and services to benefit students and families in grades 5-12. Projects may plan to collect revenue from specific activity related fees only. Those fees must be used to fund project activities outside the funded scope of the approved LPP budget, and cannot be collected without prior written approval from NYSED. No general
registration, membership, or participation fees are allowed. Additionally, to the greatest extent possible external fundraising should be exhausted prior to the collection of any fee from a student or family.

For further information on the treatment of program income, see Section 11:

http://www.oms.nysed.gov/cafe/guidance/Guide.html

L. Budget (FS-10)

The application must include an FS-10 Budget Form for the first year of the program. Please remember that travel costs for program employees should be itemized under Travel Expenses; travel for consultants should be itemized under Purchased Services.

Budgets (FS-10)
a. The application must include an FS-10 Budget Form for the first year of the program (January 1, 2018- August 31, 2018).
b. Each institution receiving a LPP award will be required to submit a FS-10 and Budget Narrative prior to the beginning of each subsequent program year. This is due to LPP-SED no later than July 15 for the program year beginning September 1, 2018. The FS-10 and Budget Narrative must be approved by SED prior to the requesting of any funds by the institution.
c. General descriptions of expenditures, allowable costs (subject to the limitations set forth in Section X), applicable federal cost principles and administrative regulations are available in the Fiscal Guidelines for Federal and State Aided Grants.

Adjustments to the award will occur if items within the proposed budget are deemed to be non-allowable or inappropriate.

Not-for-Profit Applicants:
The initial payment of 25% will be made upon approval of the contract.

Subsequent payments would be made following the submission and approval of an FS-25 form. The final payment of 10% occurs upon the approval of the Final Program and Expenditure Report (FS-10F).

XIII. PROJECT OPERATIONAL GUIDELINES

A. Operation Dates

The operation dates for the first year of this proposal will be January 1, 2018 through August 31, 2018. Expenses incurred prior to January 1, 2018, or after August 31, 2018, will not be reimbursed.
B. Required Reports

Each institution receiving a LPP award will be required to submit two project reports annually; a mid-year assessment and a final report to the LPP Program Liaison. The report elements and format for the mid-year assessment and the final report will be provided by NYSED.

For each year except the first year, the mid-year assessment, covers project activities from September 1 to February 15, will be due March 15. In the first year, the mid-year assessment, covers project activities from January 1 to February 15, will be due March 15. In addition to other specified requirements, the mid-year assessment will include a roster of all participants enrolled in the project on February 15 in each project year. The final report, which reflects on all project operations and project accomplishments, will be due September 30 of each year, in a format specified by the State Education Department. Late submissions of budgetary forms and reports may result in the suspension of funds. No extensions may be granted for submission of the final report.

Each funded LPP project is obligated to participate in the statewide evaluation of overall performance of the program. The LPP program liaison(s) will work with the LPP director’s consortium to develop the evaluation standards in accordance with 8 NYCRR 55.3 (d).

C. PROBATION/GRA NT SUS PENSION

Projects will be placed on probation for failure to meet the following performance outcomes.

a) Achievement of the Student Performance Targets will be based on the final report data.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Persistence Rate &amp; Graduation</td>
<td>95% or more</td>
</tr>
<tr>
<td>Dropout Rate</td>
<td>Not to exceed the dropout percentage of individual partner LEA(s)</td>
</tr>
<tr>
<td>Student Enrollment</td>
<td>95% or more of Target Enrollment</td>
</tr>
</tbody>
</table>

If these measures are not achieved for any one project year then the project will be placed on probation. If the project then complies with LPP guidelines and/or meets the performance standards or meets their corrective action plan the project will then be removed from probationary status. If the project is not removed from probationary status after two consecutive years the grant may be terminated. The foregoing does not limit NYSED’s other rights to terminate the program in accordance with NYSED standard contract language. The LPP student cohort’s dropout rate cannot exceed the dropout rate of the partner LEA(s).

1. NYSED will notify the Project Director and the Chief Executive Officer in writing of the Project’s probationary status.
2. The term of probation will be for one or two years.

3. The Project Director will be required to submit a corrective action plan for approval by the Program Officer.

4. Probationary Projects may receive reduced funding or have their grant withdrawn if they fail to make satisfactory progress within the established time frame.

XIV. APPLICATION REVIEW AND RATING PROCESS

A. Method of Determining Award

1. Given the level of appropriated funds, it should be possible to fund at least two LPP projects even if all projects request the maximum level of award. It is the intent of this RFP to support the two highest ranking applicants if appropriated funds allow.

Applicants who score below 45 points on the Technical (Abstract, Need for Project, and Proposal Narrative) section will not be eligible for a full review nor will they receive a LPP award.

In addition, applicants need a combined (Technical & Budget) score of 60 or more points out of 100 total points to be considered for funding.

Each eligible proposal will be reviewed by at least two reviewers. Each reviewer will score the proposal according to the indicated point criteria in the Technical Section, using the Evaluation Rubric and the criteria in the Budget Section. If individual scores are more than 15 points apart, another reviewer will rate the application. In those cases, the three scores will be averaged to calculate the final average score of the application. Grant contracts will be awarded in rank order of the highest score to lowest score. In the event of a tie score, the following will constitute the tie break criteria:

a. Highest Technical score, if scores are equal then;

b. the Proposal Narrative score, if scores are equal then;

c. the highest Need for Project score.

The contract issued pursuant to this RFP will be awarded to the applicants whose aggregate Technical and Budget scores are the highest among all the proposals rated. Successful applicants will receive the full amount of their proposed budget (within the funding limitations), if the state appropriation allows.
The maximum award will be $350,000 for projects that propose to serve at least 280 students at a rate of $1,250 per participant. The minimum award amount will be $81,617 to serve at least 65 students at a rate of $1,250 per participant.

The New York State Education Department reserves the right to adjust the award amount and limit the number of students a project can enroll. If an eligible applicant refuses to accept the award at the adjusted amount, the next eligible applicant will be canvassed.

B. Notification of Award

1. All applicants will be notified regarding the disposition of their proposal in writing.
2. Successful applicants will be informed of the amount of their award and next steps in the Grant Contract process.
3. Applications of projects in the last application cycle, which are not recommended to receive a Grant Contract, will be notified in writing of the necessary actions needed to close their respective project.
4. Applicants not recommended for funding may request a summary of reviewer comments (see description in the debriefing procedure below).

C. Post Selection Procedures

Upon selection, the successful applicant will enter into negotiations for a contract with NYSED. The contents of this RFP, any subsequent correspondence related to final contract negotiations, and such other stipulations as agreed upon may be made a part of the final contract developed by NYSED. Successful applicants may be subject to audit and should ensure that adequate controls are in place to document the allowable activities and expenditure of State funds.

D. Debriefing Procedures

Only unsuccessful applicants may request a debriefing within ten (10) business days of the postmarked date of the notice of non-award from NYSED. Applicants may request a debriefing letter on the selection process regarding this RFP by submitting an email request to: LPPRFP@nysed.gov

A summary of the strengths and weaknesses of the application, as well as recommendations for improvement will be emailed back to the applicant within ten (10) business days.

E. Contract Award Protest Procedure
Applicants who receive a notice of non-award and have requested and received a debriefing letter may protest the NYSED award decision subject to the following:

1. The protest must be in writing and must contain specific factual and/or legal allegations setting forth the basis on which the protesting party challenges the contract award by NYSED.

2. The protest must be filed within ten (10) business days of the postmark date of a debriefing letter. The protest letter must be filed with:

   NYS Education Department  
   Contract Administration Unit  
   Attn: Richard P. Duprey, GC#17-005  
   89 Washington Avenue  
   Room 505W EB  
   Albany, NY 12234

3. The NYSED Contract Administration Unit (CAU) will convene a review team that will include at least one staff member from each of NYSED’s Office of Counsel, CAU, and PCPPU. The review team will review and consider the merits of the protest and will decide whether the protest is approved or denied. Counsel’s Office will provide the applicant with written notification of the review team’s decision within seven (7) business days of the receipt of the protest. The original protest and decision will be filed with OSC when the contract procurement record is submitted for approval and CAU will advise OSC that a protest was filed.

4. The NYSED Contract Administration Unit (CAU) may summarily deny a protest that fails to contain specific factual or legal allegations, or where the protest only raises issues of law that have already been decided by the courts.

XV. FUNDING POLICY FOR PROPOSAL CYCLE

A. Grant Recipient Responsibilities:

1. Projects must operate under the jurisdiction of the IHE, have access to all needed facilities of the IHE, and are subject to at least the same degree of accountability as all other activities of the IHE. All funded projects are required to have a one person full-time (12 months) LPP director working exclusively on the LPP project with a 1.0 FTE reflected in the budget. The LPP director is responsible for providing leadership to LPP and for the management of the contract and all related LPP activities. The Project Director or Associate Director should have a minimum of a bachelor’s degree with 3-5 years of program administration & management experience.
The director should also have experience in fiscal management and budgetary oversight. In addition, he or she should have experience working with students at risk.

Jobs descriptions for all positions other than the director must be included in either the project’s approved proposal or through subsequent approval by NYSED staff. Should a vacancy occur, the NYSED program office must be notified in writing.

2. NYSED considers the role of the director as pivotal to the implementation of a successful Liberty Partnerships Program.
   a. The director is responsible for providing leadership to the LPP and for the management of the contract and all related activities.
   b. These activities include, but are not limited to: on-site management of LPP program activities; management of the budget; development implementation and evaluation of programs and services; the hiring and supervision of staff; program representation on statewide communities and boards; coordination of partnerships; sustainability planning; LPP student recruitment and admissions processes; data collection and reports required by NYSED; including, public relations.

3. The IHE is responsible for the proper disbursement of, and accounting for, project funds.
   a. Written IHE policy, as well as State rules pertaining to wages, mileage and travel allowances, overtime compensation, fringe benefits, competitive bidding, safety regulations, and inventory control must be followed for all LPP project activities.
   b. Original supporting documents are required for all Grant Contract related transactions entered into the local agency's recordkeeping system.
   c. Documents that authorize the disbursement of grant contract funds consist of purchase orders, contracts, time & effort records, delivery receipts, vendor invoices, travel documentation and payment documents.

4. Whenever necessary, it is recommended that the IHE ensure uninterrupted delivery of program services by providing at-risk funding for core LPP staff at the institution.

5. Supporting documentation for Grant Contracts must be kept for at least six years after the last payment is made unless otherwise specified by statute, regulation, audit finding, or legal action. An audit or legal action will "freeze the clock" for record retention purposes.

6. All records and documentation must be available for inspection by State Education Department officials or its representatives. For additional information about grant contracts, please refer to the Fiscal Guidelines for Federal and State Aided Grants. [http://www.oms.nysed.gov/cafe/guidance/guidelines.html](http://www.oms.nysed.gov/cafe/guidance/guidelines.html)

7. Personnel hired under the LPP award are expected to be treated equal to other personnel of similar rank and responsibility at the host IHE/agency, including equal salary commensurate with credentials, experience, and
personnel of similar rank at host IHE. LPP personnel should have equal access to tuition benefits, conferences, and other opportunities for continuing professional and personal development.

a. Staff providing academic instruction must have NYS Teacher Certification in their area of assignment or be college faculty teaching within their discipline.

b. Counseling components must utilize at least one licensed Master Social Worker (LMSW), or licensed Psychologist, or certified School Counselor.

c. Graduate and Undergraduate students may provide services in compliance with institutional guidelines and laws implemented by the Department of Labor under the direct supervision of LPP/IHE faculty.

   i. Graduate and Undergraduate students participating in any counseling activity must be under the direct supervision of a staff person identified in 7.b or under the direct supervision of program faculty.

   ii. Graduate and Undergraduate students pursuing New York State Teacher Certification through the IHE applicant may provide instruction within their discipline under the direct supervision of their program faculty and LPP/IHE faculty.

   iii. Athletic programs should utilize coaches with identifiable training/certification and experience in the particular sport or activity being conducted and in general safety, sports equipment, athletic training, and the rules of the sport or activity being conducted.

8. Each funded LPP project is obligated to participate in the statewide evaluation of overall performance of the program. The LPP program liaison(s) will work with the LPP director’s consortium to develop the evaluation standards in accordance with 8 NYCRR 55.3 (d).
Listed below are the required documents for a complete application package, in the order that they must be submitted. Submit one original and three (3) copies of the Narrative/Application in a sealed envelope labeled “Liberty Partnership Program Proposal GC#17-005; and one electronic copy of the full application. The original must be clearly identified with original signature of the CEO or designee. The letter from the CEO assigning the designee must accompany the application. Use this checklist to ensure that your application submission is complete. Incomplete applications will not be reviewed.

<table>
<thead>
<tr>
<th>Required Documents</th>
<th>Checked-Applicant</th>
<th>Checked –SED</th>
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<tbody>
<tr>
<td>Application Cover Page with Original Signature of Chief Administrative Officer</td>
<td>□</td>
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<tr>
<td>Payee Information Form (if applicable)</td>
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<td>Application Checklist</td>
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<tr>
<td>Document Type</td>
<td>Full Participation</td>
<td>Request Partial Waiver</td>
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<tr>
<td>Program Abstract</td>
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<td>Need for Project</td>
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<tr>
<td>Proposal Narrative</td>
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<td>Statement of Assurances (Appendix 1)</td>
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<td>Vendor Responsibility Questionnaire (Appendix 2)</td>
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<td>Partnerships Agreement(s) (Sample- Appendix 3)</td>
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<td>Durable Goods Inventory Form (Appendix 4)</td>
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<td>Collaborating Agency Forms (Appendix 5, Form 1, IHE Degree Programs Providing Services)</td>
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<td>Collaborating Agency Forms (Appendix 5, Form 2, List of LEAS’s in the LPP)</td>
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<td>Collaborating Agency Forms (Appendix 5, Form 3, Partner Organizations)</td>
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<tr>
<td>Project Organizational Chart (identifying the project reporting relationship and position descriptions for all LPP affiliated staff)</td>
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<tr>
<td>IHE Organizational Chart (illustrating the management structure of the program within the institution)</td>
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<td>Code of Conduct</td>
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<td>Director Resume and Job descriptions for all staff</td>
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<tr>
<td>FS-10 Budget Form* [<a href="http://www.oms.nysed.gov/cafe">http://www.oms.nysed.gov/cafe</a>]</td>
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<td>LPP Composite Budget Summary Form (Appendix 6)*</td>
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<tr>
<td>Budget Narrative*</td>
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<tr>
<td>Worker’s Compensation Documentation (encouraged)</td>
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<tr>
<td>Disability Benefits Documentation (encouraged)</td>
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<tr>
<td>Is the applicant prequalified, if required? (While no documentation is required with the application, the applicant may be required to prequalify in order to be eligible for this grant opportunity)</td>
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</table>

**M/WBE Documents Package (original signatures required)**

- [ ] Full Participation
- [ ] Request Partial Waiver
- [ ] Request Total Waiver

**Forms Required**
<table>
<thead>
<tr>
<th>Type of Form</th>
<th>Full Participation</th>
<th>Request Partial Waiver</th>
<th>Request Total Waiver</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calculation of M/WBE Goal Amount</td>
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<td>□</td>
<td>□</td>
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<td>M/WBE Cover Letter</td>
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<td>□</td>
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<tr>
<td>M/WBE 100 Utilization Plan</td>
<td>□</td>
<td>□</td>
<td>N/A</td>
</tr>
<tr>
<td>M/WBE 102 Notice of Intent to Participate</td>
<td>□</td>
<td>□</td>
<td>N/A</td>
</tr>
<tr>
<td>M/WBE 105 Contractor’s Good Faith Efforts</td>
<td>N/A</td>
<td>□</td>
<td>□</td>
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<tr>
<td>M/WBE 101 Request for Waiver Form and Instructions</td>
<td>N/A</td>
<td>□</td>
<td>□</td>
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<tr>
<td>EE0 100 Staffing Plan and Instructions</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Listed below are the required documents for a complete application package, in the order that they must be submitted. Submit one original and three (3) copies of the Narrative/Application in a sealed envelope labeled “Liberty Partnership Program Proposal GC#17-005; and one electronic copy of the full application. The original must be clearly identified with original signature of the CEO or designee. The letter from the CEO assigning the designee must accompany the application.
Please refer to the Application Instructions for detailed information about completing this page and the other required components of this application.

<table>
<thead>
<tr>
<th>Agency Code</th>
<th>Institution’s Name (Type/Print):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title (Type/Print):</td>
<td>Contact Person (Type/Print):</td>
</tr>
<tr>
<td>Address (Type/Print):</td>
<td>City:</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>Telephone:</td>
</tr>
<tr>
<td>E-Mail:</td>
<td>Fax:</td>
</tr>
</tbody>
</table>

I hereby certify that I am the applicant’s chief school/administrative officer and that the information contained in this application is, to the best of my knowledge, complete and accurate. I further certify, to the best of my knowledge, that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, application guidelines and instructions, Assurances, Certifications, Appendix A, Appendix A1-G, and that the requested budget amounts are necessary for the implementation of this project. It is understood by the applicant that this application constitutes an offer and, if accepted by the NYS Education Department or renegotiated to acceptance, will form a binding agreement. It is also understood by the applicant that immediate written notice will be provided to the grant contract program office if at any time the applicant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

**Priority Funding Region (location of the IHE applicant):**

- □ 1. Western
- □ 2. Finger Lakes
- □ 3. Central
- □ 4. Southern Tier
- □ 5. North Country
- □ 6. Mohawk Valley
- □ 7. Capital District
- □ 8. Mid-Hudson
- □ 9. The Bronx
- □ 10. Manhattan
- □ 11. Queens
- □ 12. Brooklyn
- □ 13. Staten Island
- □ 14. Long Island

**LEA Designation (check all that apply):**

- □ School designated as Priority, Struggling, and/or Persistently Struggling
- □ Focus School
- □ School designated as Persistently Dangerous
- □ School designated as Rural
- □ School under Title 1
- □ School with at least 40% of students eligible for free or reduced priced lunch

**LPP Venues:**

- □ School-based Model
- □ After school model
- □ Hybrid Model - combination of models

**Number of Students to be Served:**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date (in blue ink):</th>
</tr>
</thead>
</table>

Submit one original and three (3) copies of the Narrative/Application in a sealed envelope labeled “Liberty Partnership Program Proposal GC#17-005; and one electronic copy of the full application.
ATTACHMENT III

NEW PAYEE INFORMATION

THE STATE EDUCATION DEPARTMENT
THE UNIVERSITY OF THE STATE OF NEW YORK
ALBANY, NY 12234

In order to receive funds from the NYS Education Department, **ALL SECTIONS** of this form will need to be completed and returned with **original signature** to the Education Department program office as part of your contract application.

**Section I: Institution Identifying Information**

<table>
<thead>
<tr>
<th>Exact Legal Name of Agency</th>
<th>Contact Person/Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Please print or type

Business name, (if different from above)

Payment/Fiscal Agent (if different from above)

Address (number, street, and apt. or suite no.) to which checks will be mailed

City, State, and ZIP code (+ 4 digits) or Foreign City, Country & Postal Code

Federal Employer Identification Number (FEIN) of this agency is:

* Provide FEIN of recipient agency regardless of payment/fiscal agent.

Municipality Code (if agency is a local government):

Section II: Agency Profile

1. This agency is a (check one) □ Non-Profit Organization □ Sectarian Organization □ Non-sectarian Organization
2. This agency is a (check one) □ Sectarian Organization □ Non-sectarian Organization
3. Is this agency chartered or incorporated by the New York State Board of Regents? (Check one) □ Yes □ No
4. Is any member of the Board of Directors an employee of the NYS Education Department? □ Yes, please name ____________________________ □ No

Section III: Charity Registration Number Status (NON-PROFIT ORGANIZATIONS ONLY)

Answer **ONE** of the four questions listed below.

1. The charity registration number (NOT a tax exempt or Federal ID number) of this organization is:

2. □ This organization has applied for a charity registration number from the Department of State but has not as yet been notified of the authorization number granted.

3. □ This organization is exempt from the requirement of registering with the Department of State as a charitable organization because it receives less than $25,000 in total from governmental agencies.

4. □ This organization is exempt from the requirement of registering with the Department of State as a charitable organization pursuant to the Department of State Exemption Category indicated below (Please read attached Bulletin No. G-79 and the Summary of Exemption Categories and check **ONE** Exemption Category listed below, if applicable).

   □ Exemption Category 1 □ Exemption Category 2 □ Exemption Category 3 □ Exemption Category 4
   □ Exemption Category 5 □ Exemption Category 6 □ Exemption Category 7 □ Exemption Category 8

Section IV: Certification

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I hereby certify that the information herewith provided is to the best of my knowledge both accurate and true.

________________________________________________________________________
Chief Administrative Agency Official/Authorized Designee (Please Print)

________________________________________________________________________
Signature – Chief Administrative Agency Official/Authorized Designee                  Date
I have reviewed the payee information contained herein and hereby approve this agency for payment.

Deputy Area (Please Print) ____________________________ Program Office (Please Print) ____________________________

Program Manager (Please Print) ____________________________

Signature – Program Manager ____________________________ Date ____________________________

SED USE ONLY: Grants Finance

SED Agency Number/BEDS Code (if applicable): ____________________________ ____________________________ ____________________________
INSTRUCTIONS FOR COMPLETING NYSED FORMS: PAYEE INFORMATION/PI & SUBSTITUTE W-9

Complete all sections of the form(s) in accordance with the instructions provided below.

Section I: Institution Identifying Information:

a) Provide the following information: exact legal name of the agency, complete address to which checks should be mailed, name & e-mail address of the agency contact person

b) FEIN – This is your agency’s 9-digit federal employer identification number, often referred to as the tax identification number or TIN.

c) OSC Vendor Identification Number – This is a 10-digit number assigned by the Office of the State Comptroller (OSC) to your agency for the purpose of doing business with the State of New York.
   - If you know your agency’s number, provide it on the Payee Information/PI Form.
   - If you do not know your agency’s number, contact OSC at VMU@osc.state.ny.us to obtain it so that it can be provided on the PI Form.
   - If OSC notifies you that your agency does not yet have a vendor identification number – Complete the NYSED Substitute W-9 provided herein according to the instructions on the form. Submit both forms (PI and the NYSED Substitute W-9) as both will be required for payments to your agency.

d) Data Universal Numbering System/DUNS Number – This is a 9-character number issued by Dun & Bradstreet that identifies your agency. It is used by the federal government to track how federal grant funds are allocated & expended by NY State, the State Education Department, and local agencies. To search for your agency’s DUNS number or to register for one, go to Dun & Bradstreet’s website: http://fedgov.dnb.com/webform/displayHomePage.do.

e) Central Contractor Registration (CCR) – This is a government-wide registry for organizations doing business with the federal government. It collects, validates, stores and disseminates business information about the federal government’s trading partners. To register with CCR, go to http://www.ccr.gov & click on the “Start New Registration” link. Upon registration, your agency will be provided with an “Active Until” date. Failure to renew your registration (“Active Until Date”) may delay payments from NYSED.

Section II: Agency Profile

- Question 1 - Self-explanatory.
- Question 2 – A sectarian organization is defined as one which is affiliated with a particular religious group. A non-sectarian organization has no religious affiliation.
- Question 3 - "Chartered or incorporated" here means created by the NYS Board of Regents.
- Question 4 - Self-explanatory.

Section III: Certification - Be sure to complete this section with an original signature.

Important Notes:

Changes to Vendor Information - If any of the information maintained by OSC in its vendor file changes, please contact OSC directly at VMU@osc.state.ny.us.

Electronic Payments - If your agency is not already signed up to receive payments electronically through ACH (Automated Clearing House), please enroll directly with OSC at http://www.osc.state.ny.us/epay/index.htm.
TYPE OR PRINT INFORMATION NEATLY. PLEASE REFER TO INSTRUCTIONS FOR MORE INFORMATION.

Part I: Payee/Vendor/Organization Information

AGENCY ID:

1. Legal Business Name:

2. If you use a DBA, please list below:

3. Entity Type (Check one only):
   - Sole Proprietor
   - Partnership
   - Limited Liability Co.
   - Business Corporation
   - Unincorporated Association/Business
   - Federal Government
   - State Government
   - Public Authority
   - Local Government
   - School District
   - Fire District
   - Other

Part II: Taxpayer Identification Number (TIN) & Taxpayer Identification Type

1. Enter your TIN here: (DO NOT USE DASHES)

2. Taxpayer Identification Type (check appropriate box):
   - Employer ID No. (EIN)
   - Social Security No. (SSN)
   - Individual Taxpayer ID No. (ITIN)
   - N/A (Non-United States Business Entity)

Part III: Address

1. Physical Address:
   - Number, Street, and Apartment or Suite Number
   - City, State, and Nine Digit Zip Code or Country

2. Remittance Address:
   - Number, Street, and Apartment or Suite Number
   - City, State, and Nine Digit Zip Code or Country

Part IV: Certification of CEO or Properly Authorized Individual

Under penalties of perjury, I certify that I am the CEO or properly authorized individual and that the number shown on this form is my correct Taxpayer Identification Number (TIN).

Sign Here:

__________________________________________
Signature

__________________________________________
Date

__________________________________________
Print Name

__________________________________________
Phone Number

__________________________________________
Email Address

Part V: Contact Information – Individual Authorized to Represent the Payee/Vendor/Organization

Contact Person: ________________________________
   (Print Name)

Title: _________________________________________

Contact’s Email Address: ________________________________

Phone Number: (____) ______

Part VI: Survey of Future Payment Methods

Please indicate all methods of payment acceptable to your organization:

[ ] Electronic  [ ] Check  [ ] VISA
The NYS Education Department (NYSED) is using the NYSED Substitute Form W-9 to obtain certification of your TIN in order to facilitate your registration with the SFS centralized vendor file and to ensure accuracy of information contained therein. We ask for the information on the NYSED Substitute Form W-9 to carry out the Internal Revenue laws of the United States.

Any payee/vendor/organization receiving Federal and/or State payments from NYSED must complete the NYSED Substitute Form W-9 if they are not yet registered in the SFS centralized vendor file.

**Part I: Payee/Vendor/Organization Information**
1. **Legal Business Name**: For individuals, enter the name of the person who will do business with NYS as it appears on the Social Security card or other required Federal tax documents. An organization should enter the name shown on its charter or other legal documents that created the organization. Do not abbreviate names.
2. **DBA (Doing Business As)**: Enter your DBA name, if applicable.
3. **Entity Type**: Mark the Entity Type doing business with New York State.

**Part II: Taxpayer Identification Number (TIN) and Taxpayer Identification Type**
1. **Taxpayer Identification Number**: Enter your nine-digit Social Security Number, Individual Taxpayer Identification Number (ITIN)¹ or Employer Identification Number.
2. **Taxpayer Identification Type**: Mark the type of identification number provided.

**Part III: Address**
1. **Physical Address**: List the location of where your business is physically located.
2. **Remittance Address**: List the location where payments should be delivered.

**Part IV: Certification of CEO or Properly Authorized Individual**
Please sign, date and print the authorized individual’s name, telephone and email address. An email address will facilitate communication and access to Vendor Self Service.

**Part V: Contact Information**
Please provide the contact information for an individual who is authorized to make legal and financial decisions for your organization. An email address will facilitate communication and access to Vendor Self Service.

**Part VI: Survey of Future Payment Methods**
Payment methods are needed for informational purposes. To expedite payments, vendors are strongly encouraged to consider accepting payment via VISA credit card.

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¹ An ITIN is a nine-digit number used by the United States Internal Revenue Service for individuals not eligible to obtain a Social Security Number, but are required to file income taxes. To obtain an ITIN, submit a completed W-7 to the IRS. The IRS will notify you in writing within 4 to 6 weeks about your ITIN status. In order to do business with New York State, **you must submit IRS Form W-8** along with our NYSED Substitute Form W-9 showing your ITIN. IRS Form W-8 certifies your foreign status. To obtain IRS Forms W-7 and W-8, call 1-800-829-3676 or visit the IRS website at www.irs.gov.
ATTACHMENT IV: TECHNICAL & BUDGET SECTIONS

These sections should present a cohesive document with each individual section adhering to the format outlined in each section below. The Technical Section must not exceed 30 pages (for submissions over thirty pages the reviewer will only review the first thirty pages), double spaced, with 1” margins on all sides on 8 ½” X 11” size pages; font should be Times New Roman or Arial with a font size 12. (Other required supporting documents, including the organizational chart and resumes, are not counted toward this page limit.) The name of the applicant IHE must appear in the top right corner of each page. All pages must be numbered bottom centered of each page. The budget section does not have a page requirement or limit. The entire document should be double spaced. Tables/Charts should be centered in the page and the font size should be no smaller than 10 but at least a 12 if at all possible.

TECHNICAL SECTION

1. ABSTRACT (2 points) (maximum 2 pages)

Provide up to a two-page abstract of the proposed project. The abstract should reflect the contents of Section V. Proposal Focus and Program Service Requirements, Pg. 13.

2. NEED FOR PROJECT (30 points) (maximum 10 pages)

a) Purpose of Project:

1. Demonstrate a partnership with at least one school under Title 1, or with 40% students eligible for free or reduced lunch, or identified as focus, struggling, persistently struggling, and/or persistently dangerous, or as a rural LEA.

2. Describe how your project will identify partner LEAs who will commit to the enrollment of at least 40 students per partner site.

3. Specify measurable goals and objectives for the recruitment and retention of the targeted at-risk youth population whom you will serve.

4. A. Describe at least one evidence/research based strategy that will serve as a major component of your project’s design.

   B. Demonstrate how your proposed design will integrate the expectations, knowledge, and skills needed for high school graduation, career preparedness, and college-level work for the identified student participant population utilizing a model which provides 12 months of continuous programming to students.

   C. Please describe your program’s model as either an after-school model, an in-school model, or a model which is a combination of the two.

5. Describe how your project will implement a four-week summer component in each year of the cycle.
6. Describe your plans for ensuring that each LPP participant will be offered a summer program opportunity at least once during the funding cycle.

7. Describe how your project will ensure enrollment of at least 40 students in the summer component.

b) IHE’s Commitment
1. Demonstrate the high level of IHE commitment and the process used to involve faculty members, undergraduate and graduate/professional students from degree programs in fields including: human services, education, counseling, social work, psychology, sociology, and others which can identifiably foster college and career readiness in the student participant population. Departments must be noted in Appendix 5.

2. Develop an LPP project code of conduct that is aligned with the NYS Dignity for All Students Act. The actual Code of Conduct document should be a separate attachment and will not count toward the maximum 10-page limit in this section.

3. Describe how the LPP project will provide student services such as instructional services, workshops, group counseling, and group tutoring through small group environments with low student to staff ratios. Provide your anticipated student to staff ratios for these activities. Describe the LPP venues where services will be delivered.

4. Briefly describe the institution’s plan for the provision of sufficient space and resources consistent with other academic support programs on the campus for the effective operation of the project.

5. Briefly describe the institution’s plan to ensure that the project will have sufficient access to and use of space needed to conduct the following: group meetings/workshops, conferencing, confidential academic and/or financial counseling, program administration, and tutoring services.

c) Partnerships
1. Provide the process for cooperation with LEAs, IHEs, municipalities, businesses, and not-for-profit community based organizations. LEAs and organizations must be identified on the forms included in Appendix 5. Provide Partnership Agreements that fully and specifically detail their roles to ensure the efficient coordinated delivery of services. There should be a specific number of students who are projected to be served in the partnership agreement.

2. Provide the process for the inclusion and ongoing meaningful involvement of students, parents, department chairs, and teachers in the planning and implementation of the LPP project.

d) Project Staffing and Management
1. Provide the following items:
a. Describe all the professional positions. Attach a current resume for the Project Director and include job descriptions for all staff including part time professionals and support staff. Resumes will not count toward the maximum 10-page limit in this section.

b. Attach an organizational chart illustrating the projected staffing and the projected number of student participants at each partner LEA and/or CBO. The projected number of students reflected in the organizational chart should match the number of contracted students to be served by the project. The organizational chart will not count toward the maximum 10-page limit in this section.

c. Describe a management plan that will assure the effective completion of project activities.

d. Provide an organization chart that indicates the management structure of the program within the institution. The organization chart will not count toward the maximum 10-page limit in this section.

3. PROPOSAL NARRATIVE (43 points) (maximum 18 pages)

Program Elements:

A. Recruitment and Selection of at-risk students:
   1. Demonstrate the process for the identification of students in your proposed LEA partner(s) who are at-risk of dropping out of school. Describe how you will ensure that students recruited and selected meet at least one or more of the LPP risk factors. See factors in Section IV. Student Eligibility and
      i. LEAs that are persistently struggling, struggling, and or/persistently dangerous
      ii. LEAs that are deemed eligible for free or reduced-price lunches

   2. Identify the staff person(s) responsible for the identification and recruitment of LPP students.

   3. Describe the process and list the criteria to select participants for any component of the program, such as requirements for internships, summer programming, field trips, and any paid employment.

B. Role Models and Caring Adults: Please describe how your project will implement the following:

   1. Use of volunteers
   2. Parental engagement
   3. Involvement of current or former Liberty participants

C. Project Continuity, Retention, and Graduation: Demonstrate a program to provide for continuity of services throughout a student's progression through middle school and secondary school. Describe how the project
design will provide 12 months of intervention services. Describe how the project will deliver the following services:

i. Mentoring
   1. Structured/supervised programs with goals and objectives

ii. Tutoring
   1. Individual or group academic support of curriculum
      a. Specific homework help
      b. Assistance with completing school projects
      c. Preparing for tests
      d. Instruction on very specific academic material

D. Academic Support Services
1. Describe how your project will provide academic support services for all student participants. Establish a benchmark with measurable outcomes that demonstrates academic improvement for each student participant.

E. Data Collection
1. Describe your project’s strategy for data collection, including how report cards will be collected and tracked for LPP reporting requirements.
2. Identify the staff person(s) responsible for collecting, tracking, and reporting this data. Staff funded by LPP funds that are responsible for data collection and reporting should have these duties reflected in their job description.

F. Workforce Development
1. Describe a workforce component that incorporates the following activities:
   i. Workforce etiquette/workplace expectations
   ii. Workforce skills
      i. Job applications/resume writing
      ii. Job shadowing
      iii. Internships
      iv. Employment
      v. Career presentations
      vi. Interest inventories
G. Social-Emotional Assessment & Personal Learning Plan

1. Explain how the project will:
   
i. Utilize a social emotional assessment such as Success Highways and Indigo
   
ii. Implement a Personal Learning Plan (PLP) process to assist students in the development of an annual plan which identifies the student's individual, educational and career goals for a 12-month period.
   
iii. Describe which staff will administer, implement, and monitor the progress of the PLP for each LPP participant.

H. Case Management

1. Describe the case management system that will be utilized, specifying all evidence based modalities and service referrals and how it integrates with the overall goal of the project. This section should also describe how projects will provide students:
   
i. Individual counseling
   
ii. Group counseling
   
iii. Family counseling
   
iv. Home visit services

I. Additional Service Categories

1. In addition to the services required by the legislation that created the Liberty Partnerships Program, there are other services that contribute to successful student outcomes. Describe how your project design will incorporate at least three of the following service categories:
   
i. Leadership/Civic Duties:
      -Leadership clubs, workshops, and positions
      -Leadership conferences and development
      -Community services projects (stand-alone)
      -Volunteering
      -Civic duty activities
      -Leadership Municipal or State Government activities

ii. Service Learning

iii. Enrichment/cultural activities

iv. Sports/wellness

v. Life skills

vi. Social skills
J. Retention:
Describe your plan for ensuring that students continue participating in the project throughout their middle and/or secondary school years. The plan should describe summer retention strategies such as phone calls or mailings to determine if a student plans to return.

K. Professional Development
Describe the project’s professional development process for LPP staff that have direct responsibility for promoting quality programming to students, including local, regional, and statewide LPP coordinating activities. This section must describe how appropriate LPP staff will be involved in the following activities:

i. The LPP Professional Development Conferences. There are at least two professional development conferences- one intended for project directors only and one intended for project directors and staff.

ii. The Empire Promise Youth Summit: an annual student-centered event that brings together all LPP funded projects, including a cohort of students from each project.
BUDGET SECTION

Applicants must provide a Proposed Budget for the Operation of a Federal or State Program (FS-10 form Excel Version) for the project with an original signature from the CEO of the IHE applicant only, or their designee, if a letter is included from the CEO making such a designation.

Budget documents include: The FS-10, LPP Composite Summary, Budget Narrative and Payee Information.

The applicant/fiscal agent cannot act as a flow-through for grant funds to pass to other partners and third parties. The applicant should provide a minimum of 55% of direct cost services to the program, meaning at least 55% of the annual budget should be allocated to line items other than Purchased Services, including BOCES Purchased Services.

1. Applicants must provide a budget narrative describing the commitment of resources for the project. All expenditures have a direct connection to LPP project activities including all items mentioned in the LPP Composite Summary.
2. Applicants must demonstrate sound fiscal management and oversight of the LPP project and verifies the project director as the primary person responsible for project expenditures.
3. Applicants must provide the LPP Composite Summary, included as Appendix 6, provides an itemized listing of the sources of additional funding or in-kind matching services or resources, and the amount of any matching funds and their source. It describes in detail the uses of matching funds.
4. Applicants must complete the excel version FS-10 Budget Form for the initial project period (January 1, 2018 to August 31, 2018). Providing detail of the allocation of funds to each budget category of the FS-10 Budget Form. In particular, describe how Purchased Services are linked to the objectives and activities of the project. The FS-10 budget must be consistent with the budget narrative.
5. Applicants must demonstrate that expenditures are reasonable and are targeted to the provision of direct services to students by the partnership institutions.
## Liberty Partnerships Program

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**Rating Guidelines:**

Excellent: Specific and comprehensive. Complete, detailed, and clearly articulated information as to how the criteria are met. Well-conceived and thoroughly developed ideas.

Good: General but sufficient detail. Adequate information as to how the criteria are met, but some areas are not fully explained and/or questions remain. Some minor inconsistencies and weaknesses.

Fair: Non-specific. Criteria appear to be minimally met, but limited information is provided about approach and strategies. Lacks focus and detail.

Poor: Does not appear to meet the criteria, fails to provide information, provides inaccurate information, or provide information that requires substantial clarification as to how the criteria are met; or simple restate the criteria.

Not Found (N/F): Item is not found in the proposal.
### Attachment V - Application Evaluation Rubric - Part 1

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1. The applicant provides a comprehensive description of the project, based on Section V. **Proposal Focus and Program Service Requirements (Pg.13).**

**SUBTOTAL**

**Comments:**
## 2. Need for Project [30 points]
The applicant describes the overall need for the project by addressing the following criteria:

<table>
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<tr>
<th>a. 1. Demonstrates a partnership with at least one school under Title 1, or with 40% students eligible for free or reduced lunch, or identified as focus, struggling, persistently struggling and/or persistently dangerous, or as a rural LEA.</th>
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<th>a. 2. Describe how the project will identify partner LEAs who will commit to the enrollment of at least 40 students per LEA.</th>
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<th>a. 3. Specify measurable goals and objectives for the recruitment and retention of the targeted at-risk youth population that will be served.</th>
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<th>a. 4. a. Describe at least one evidence/research based strategy that will serve as a major component of your project’s design.</th>
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<th>a. 4. c. Describe the program’s model as either an after-school model, an in-school model, or a model which is a combination of the two.</th>
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<th>a. 5. Describe how the project will implement a four-week summer component in each year of the cycle.</th>
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<th>a. 6. Describe the plans for ensuring that each LPP participant will be offered a summer program opportunity at least once during the funding cycle.</th>
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b. 3. Describe how the LPP project will provide student service such as instructional services, workshops, group counseling, and group tutoring through small group environments with low student to staff ratios. Provide the anticipated student to staff ratios for these activities. Describe the LPP venues where services will be delivered.

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b. 4. Briefly describe the institution’s plan for the provision of sufficient space and resources consistent with other academic support programs on the campus for the effective operation of the projects.

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b. 5. Briefly describe the institution’s plan to ensure that the project will have sufficient access to and use of space needed to conduct the following: group meetings/workshops, conferencing, confidential academic and/or financial counseling, program administration, and tutoring services.

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c. 1. Provide the process for cooperation with LEAs, IHEs, municipalities, businesses and not-for-profit community based organizations. Includes partnership agreement with each collaborating partner (Appendix 3). Identifies partner LEAs and organizations in (Appendix 5).

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c. 2. Provides the process for the inclusion and ongoing meaningful involvement of students, parents, deans, faculty, department chairs, and teachers in the implementation of the LPP project.

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d. 1. a. Describe all the professional positions. Provide a resume for Project Director and job descriptions for all staff.

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d. 1. b. Attach an organizational chart illustrating the projected staffing and the projected number of student participants at each partner LEA and/or CBO. The projected number of students reflected in the organizational chart should match the number of contracted students to be served by the project.

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d. 1.c. Describe a management plan that will assure the effective completion of project activities.

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d. 1.d. Provide an organization chart that indicates the management structure of the program within the institution.

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<th>3. Proposal Narrative [43 points]</th>
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<td>The applicant provides a comprehensive description of the project activities, including the following:</td>
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<tr>
<td>a. 1. Demonstrates the process for the identification of students in the proposed LEA partner who are at-risk of dropping out of school, including recruitment and selection of participants.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>a. 2. Identifies the staff persons responsible for identification and recruitment of LPP students</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>a. 3. Describes the process and lists the criteria for selection of participants in various components such as internships, summer programming, field trips, etc. of the program.</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>b. 1. Describes the use of volunteers in program implementation.</td>
<td>1</td>
<td>.75</td>
<td>.5</td>
<td>.25</td>
<td>0</td>
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</tr>
<tr>
<td>b. 2. Demonstrates parental engagement in program implementation.</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>b. 3. Demonstrates the involvement of current or former Liberty participants in program implementation.</td>
<td>1</td>
<td>.75</td>
<td>.5</td>
<td>.25</td>
<td>0</td>
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</tr>
<tr>
<td>c. 1. Demonstrates a program to provide for the continuity of services through a student’s progression through middle and secondary school.</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>c. 2. Demonstrates a project design that provides 12 months of intervention services.</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
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<tr>
<td>c. 3. Describes how programming will be delivered utilizing one or more of the following strategies:</td>
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<tr>
<td>i. Mentoring- structured/ supervised programs with goals and objectives</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>ii. Tutoring- individual or group academic support of curriculum including specific homework help, assistance with completing school projects, preparing for tests, and instruction on very specific academic material</td>
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<tr>
<td>d. 1. Describes how the project will provide academic support services for all student participants. Establish a benchmark with measurable outcomes that demonstrates academic improvement for each student participant.</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>e. 1. Describes the project’s strategy for data collection, including how report cards will be collected and tracked for LPP reporting requirements.</td>
<td>2</td>
<td>1.5</td>
<td>1</td>
<td>.5</td>
<td>0</td>
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</tr>
<tr>
<td>e. 2. Identifies the staff person(s) responsible for collecting, tracking, and reporting this data.</td>
<td>1</td>
<td>.75</td>
<td>.5</td>
<td>.25</td>
<td>0</td>
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<td>f. 1. Describes a workforce component that incorporates the following activities:</td>
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<tr>
<td>i. workforce etiquette/ workplace expectations</td>
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<td>1.5</td>
<td>1</td>
<td>.5</td>
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<tr>
<td>ii. workforce skills- including job applications/resume writing, job shadowing, internships,</td>
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</tbody>
</table>
employment, career presentations and interest inventories.

| g. 1. Describes the use of a social emotional assessment for students, such as Success Highways and Indigo. | 2 | 1.5 | 1 | .5 | 0 |
| g. 2. Implement a Personal Learning Plan (PLP) process to assist students in the development of an annual plan which identifies the student's individual, educational and career goals for a 12-month period. | 2 | 1.5 | 1 | .5 | 0 |
| g. 3. Describes which staff will administer, implement, and monitor the progress of the PLP for each participant. | 2 | 1.5 | 1 | .5 | 0 |
| h. 1. Describes the case management system that will be utilized, specifying all evidence based modalities and service referrals and how it integrates with the overall goal of the project. This section should include individual counseling, group counseling, family counseling, and home visit services. | 4 | 3 | 2 | 1 | 0 |
| i. 1. Describes at least three of the following additional services that contribute to successful student outcomes: Leadership/civic duties (refer to Technical Section I. Pg. 57 for examples), service learning, enrichment/cultural activities, sports/wellness, life skills, and social skills. | 2 | 1.5 | 1 | .5 | 0 |
| j. 1. Describes a plan for ensuring that students continue participating in the project throughout their middle and/or secondary school years. The plan should describe summer retention strategies such as phone calls or mailings to determine if a student plans to return. | 2 | 1.5 | 1 | .5 | 0 |
| k. 1. Describes the project’s professional development process for LPP staff that have direct responsibility for promoting quality programming to students, including local, regional, and statewide LPP coordinating activities. This section must describe how the appropriate LPP staff will be involved in the following activities:  
  i. LPP statewide professional development conferences  
  ii. The Empire Promise Youth Summit | 2 | 1.5 | 1 | .5 | 0 |

SUBTOTAL

Comments:

Total Score, Technical Criteria: ( ) out of 75
## Attachment V- Application Evaluation Rubric- Part 5

<table>
<thead>
<tr>
<th>Budget [25 points]</th>
<th>Excellent (Max Score)</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>N/F</th>
<th>Your Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describes the commitment of resources for the project.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>0</td>
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<tr>
<td>2. Demonstrates sound fiscal management and oversight of the LPP project and verifies the project director as the primary person responsible for project expenditures.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>0</td>
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<tr>
<td>3. The LPP Composite Summary, included as Appendix 6, provides an itemized listing of the sources of additional funding or in-kind matching services or resources, and the amount of any matching funds and their source. It describes in detail the uses of matching funds.</td>
<td>21%+</td>
<td>16%-20%</td>
<td>11%-15%</td>
<td>1%-10%</td>
<td>No Match=0%</td>
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<tr>
<td>4. Describes the purpose of the allocation of funds to each budget category of the FS-10 Budget Form. In particular, describing how Purchased Services are linked to the objectives and activities of the project. The FS-10 budget is consistent with the Budget Narrative.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>5. Demonstrates that expenditures are reasonable and are primarily targeted to the provision of direct services to students by the partnership institutions.</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
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</tbody>
</table>

**Number of Students Served (from application cover page)**

**Total Budget Requested (from application cover page)**
### Scoring

<table>
<thead>
<tr>
<th></th>
<th>Score ( ) out of 25</th>
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</thead>
<tbody>
<tr>
<td><strong>Technical Criteria Score (Out of 75)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Budget Score (Out of 25)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
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</tbody>
</table>

**Total Application Score**

_______
Appendix I
2017 – 2022 LPP Application

STATEMENT OF ASSURANCES

1. The recipient will, if funded, operate a Liberty Partnerships Program (LPP) as described by this Request for Proposals and within the letter and spirit of all pertinent legislation (Section 612, Subdivision 6 of the Education Law)

2. Funds from the State LPP award will supplement not supplant funds from other sources.

3. All activities supported by State LPP funds will, to the extent possible, be accessible by persons with disabilities.

4. Upon request, the recipient will provide State Education Department staff access to its records and other sources of information concerning the operation of the LPP program.

5. All materials developed in whole or in part with the support of State LPP funds, including publicity releases and program announcements whether published in print or on the web, will include the following statement:

   Support for the development and production of this material was provided by a grant under the Liberty Partnerships Program administered by the New York State Education Department.

6. The State LPP funds requested will be used to operate a program to provide support services to students enrolled in public and non-public school who are identified as having a high risk of dropping out of school. *Original signature of Chief Executive Officer or their designee is required.

CHIEF EXECUTIVE OFFICER CERTIFICATION

I hereby certify that the information in this application is correct and in total compliance with appropriate State laws and regulations and that the program design will be carried out as described in the application.

Signed* _____________________________  Date _____________________________

(Chief Executive Officer)

Print name and title __________________________________________________________

65
Appendix II – Vendor Responsibility Questionnaire

Check one of the following:

☐ My organization has filed its Vendor Responsibility Questionnaire online via the New York State VendRep System and that the current questionnaire was certified within the past six months.

☐ I am including a completed paper copy of the Vendor Responsibility Questionnaire with the bid proposal.

☐ My entity is exempt based on the OSC listing.

☐ Other, explanation:

Name of Applicant:_____________________________________________________

Signature:_____________________________________________________________

Print Name:____________________________________________________________

Title:_____________________________________________________________
Appendix III

SAMPLE PARTNERSHIP AGREEMENT

Applicants must develop their own agreements. Failure to submit customized Partnership Agreement(s) will be an indicator that the required collaboration did not occur. The following sample is to assist you in the development of your agreements.

Partnership Agreement

The ________________________________ and ________________________________
(Name of Applicant) (Name(s) of Partnering Agencies)

agree to assume and perform the following roles and responsibilities in the administration of the Liberty Partnerships Program during the 2012-2017 funding cycle. The goal of this program is to provide a Liberty Partnerships Program of the highest quality for the participating students.

The partnership agreement is comprised of three sections:
• Joint Responsibilities of the Applicant and Partnering Agencies
• Responsibilities of the Partnering Agencies
• Responsibilities of the School

I. Joint Responsibilities of the Applicant and Partnering Agencies

1. Ensure that all procedures and regulations for health, fire, safety, pick-ups, parent consents, transportation, field trips, food, sports-related health exams, insurance, medical and other emergency procedures will be clearly listed and widely disseminated, and that they will conform to applicable local and state standards.

2. Structure and facilitate meaningful communication between the school staff and the Liberty Partnerships Program. Provide on-going opportunities for school staff and Liberty Partnerships’ staff to plan, coordinate, and integrate curricular areas with school activities.

3. Hold regularly scheduled meetings between the staff of the partnering agencies and school principal, as well as other appropriate personnel, to discuss all issues pertaining to the Liberty Partnerships Program. Issues would include, but not be limited to, staff performance, effectiveness of program features, student development, and other issues of program evaluation.

4. Develop mechanisms and opportunities to communicate on a regular basis with both the Parents’ Association and the family members of the program’s students, including information regarding school day and after-school program that is accessible in a public space.

5. Recruit, select, and enroll student participants in the Liberty Partnerships Program and disseminate procedural information widely.
II. Responsibilities of the Partnering Agencies

1. Communicate and provide information to the lead applicant about the Liberty Partnerships Program through regularly scheduled meetings.

2. If applicable, recruit, hire, and train all program staff in cooperation with the school. The school principal and/or his/her designee will participate in the selection of the full-time person responsible for the program.

3. Manage the day-to-day operations of the program and notify the lead applicant of any problems, issues, and concerns in a timely fashion.

4. Track student enrollment and attendance and provide that information to the lead applicant on at least a monthly basis.

5. Invite designated school staff to attend staff meetings.

6. Attend school staff meetings as determined by the lead applicant.

7. Make staff available for in-service training throughout the school year and arrange for appropriate substitute coverage.

8. Work cooperatively with the research and evaluation component of the Liberty Partnerships Program.

9. Ensure the respectful treatment of school property, including replacing property damaged or destroyed by the students or staff of the after-school program, and keeping the spaces used by the after-school program clean. Equipment will be inventoried and labeled.

10. Ensure that all applicable local and state requirements for staff clearances are met.

11. Develop protocol for emergency notification of parents and/or guardians.

12. Establish procedures for the safe-keeping and safe transport of children after program hours.

13. Ensure that there is staff on-site during program hours trained in first aid, CPR and medical emergencies.

14. Maintain appropriate insurance coverage.

15. Provide the lead Liberty Partnerships Program with all appropriate and requested financial information and reports in a timely fashion.
III. Responsibilities of the School

1. Work cooperatively with the Liberty Partnerships Program and the independent evaluator. Information requested by evaluators is to be provided in a timely manner. This may include, but not be limited to, sharing school profiles and all relevant data available in the public domain. In addition, test scores, grades, attendance, etc. will be provided with full protection of the rights of the students and within the regulations of the school system including, but not limited to, executing any data protection agreements that may be required under the Family Educational Rights and Privacy Act ("FERPA") and New York State Education Law §2-d. Failure to provide student data to the LPP project within the mutually agreed upon timeline may be grounds for termination of the partnership agreement with the LEA.

2. If the program is school based, assure the availability of clean spaces for the after-school program in an adequate number of classrooms, as well as the cafeteria, auditorium, library, computer lab, gymnasium, and any other relevant space.

3. Supply adequate and appropriate storage space for the after-school program’s materials and equipment.

4. Facilitate the provision of full custodial services at no cost.

5. Identify and organize appropriate security for the after-school program at no cost.

Agreed on this day, ____________________________, by ____________________________,

______________________________  ______________________________
(Name of Partnering Agency)  (Name of Partnering Agency)

________________________________________  ____________________________
(Signature of Executive Director)  (Signature of Executive Director)

________________________________________
(Signature of School District)

(You may add more signatures as appropriate.)
Appendix IV – Durable Goods Inventory

<table>
<thead>
<tr>
<th>Institution Name</th>
</tr>
</thead>
<tbody>
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<table>
<thead>
<tr>
<th>Director Name / Date</th>
<th>Direct Supervisor Name / Date</th>
</tr>
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<th>Phone #</th>
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<tr>
<th>Email</th>
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</table>

**Please Note:** All goods purchased with LPP funds are the property of the State and shall be returned to the Department if the LPP program is discontinued.

Property purchased pursuant to this AGREEMENT is deemed to be the property of the STATE. For purposes of this form please list electronic items, furniture, musical instruments, durable goods, etc. that have been purchased for the current funding cycle.

<table>
<thead>
<tr>
<th>#</th>
<th>Item/Model</th>
<th>Quantity</th>
<th>Serial #</th>
<th>Vendor</th>
<th>Invoice #</th>
<th>Total Cost $</th>
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<tbody>
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</table>
Appendix V – Collaborating Agency Forms
Form 1 - IHE

List all IHE Degree Programs providing service to LPP
Insert additional rows if necessary

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Degree Program</th>
<th>Primary Contact for Planning &amp; Implementation of Service, number &amp; email</th>
<th>Role/Description of Service</th>
</tr>
</thead>
<tbody>
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<td>1</td>
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</table>
### Appendix V – Collaborating Agency Forms

**Form 2 – Partner Schools**

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Name and Address of School or GED Program</th>
<th>School Building BEDS Code Example: 000000-00-0000</th>
<th>Primary Contact Representing LEA for LPP Planning &amp; Implementation # &amp; email</th>
<th>School Building Total Population</th>
<th># of LPP students to be served</th>
<th>Grade levels to be served</th>
<th>School Graduation Rate</th>
<th>Is this school high poverty?</th>
<th>Is this school classified as a Priority School?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sample: SCHOOL X</td>
<td>123456-23-7894</td>
<td>David Small, 456-789-1256, <a href="mailto:dsmall@schooly.edu">dsmall@schooly.edu</a></td>
<td>800</td>
<td>100</td>
<td>10,11,12</td>
<td>65%</td>
<td>Yes</td>
<td>Focus, Struggling, Persistently Struggling, Persistently Dangerous</td>
</tr>
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<td></td>
<td>Continue as needed for additional partner schools</td>
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</table>
**Appendix V – Collaborating Agency Forms**  
**Form 3 – Partner Organizations**

**List all partner organizations providing services**  
**Insert additional rows if necessary**

**NOTE:** An individual, agency, organization or other entity that only provides services is considered to be a vendor, not a partner, and would not require a Partnership Agreement. Comprehensively describe the primary partners that are involved in planning and implementing of the project.

* Partner Organization Code: (1) Local government agency; (2) College/university; (3) Community Based Organization; (4) Business; (5) Professional organizations and associations; (6) Other.

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Name and Address of Partner Organization</th>
<th>Primary Contact Representing Organization for LPP Planning &amp; Implementation # &amp; email</th>
<th>*Organization Code</th>
<th>Partnership Agreement</th>
<th>Role of the Partner/Description of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>3</td>
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<td>6</td>
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</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Continue as needed for additional partner organizations*
Appendix VI – LPP Composite Summary

**LPP Composite Summary**

The figures to be entered in the LPP column (1) on lines with the FS-10 number codes must correspond to the totals reported for each budget code category on the FS-10 form. LPP Indirect cost (column 1) equals a maximum 8% of SUBTOTAL (Line 7).

*ROUND CENTS TO THE NEAREST DOLLAR

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Expenditure Category</th>
<th>Code</th>
<th>LPP (1)</th>
<th>Institution (2)</th>
<th>Other Sources (3)</th>
<th>TOTAL (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Salaries for Professional Personnel</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Salaries for Non-Professional Personnel</td>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Clerical/Secretarial</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Student Assistants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Purchased Services</td>
<td>40</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Supplies &amp; Materials</td>
<td>45</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Instructional</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Travel Expenses</td>
<td>46</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Student/Programmatic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Staff/Administrative</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6</td>
<td>Employee Benefits</td>
<td>80</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Professional___%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Clerical/Secretarial___%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Student Assistants___%</td>
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<td></td>
<td>d. Other___%</td>
<td></td>
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<td></td>
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<tr>
<td>7</td>
<td>SUBTOTAL of Lines 1-6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Indirect Cost*</td>
<td>90</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Minor Remodeling</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Equipment</td>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>GRAND TOTAL (Lines 7 - 10)</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Appendix VII- Program Definitions

DEFINITIONS

At Risk: someone who is unlikely to graduate on schedule with both the skills and self-esteem necessary to exercise meaningful options in the areas of work, leisure, culture, civic affairs, and inter/intrapersonal relationships.

High Poverty Index: a school in which at least 40 percent of students are eligible for free or reduced-price lunches under Title 1, Section 1114 of the Every Student Succeeds Act.

IHE or Institution of Higher Education: solely for the purposes of this RFP, is defined as

i. an institution of higher education as defined in Education Law §50.1;  
ii. an education corporation as defined in Education Law §216-a;  
iii. a corporation having an educational purpose that is formed under the Not-for-Profit Corporation Law or the Business Corporation Law with the consent of the Commissioner pursuant to Education Law §216 (“§216 Consent”);  
iv. a Limited Liability Company having an educational purpose that is formed under the Limited Liability Company Law with §216 Consent;  
v. institutions that meet the Regulations of the Commissioner of Education in sections §52.1 and §52.21; or  
vi. IHE that is based in New York State

LEA or Local Education Agency: for purposes of this RFP LEA is defined as public school districts, private schools and charter schools.

LPP Venues:

i. School-based Model: LPP services are (a) inserted into the regular school day;  
(b) as part of the extended-day schedule  
ii. After school Model: LPP services are a part of the extended-day schedule, or weekend, on campus, at partner LEA and/or CBO  
iii. Hybrid Models: Individual LPPs may offer services through multiple venues.

Case Management: a service delivery approach; a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual’s holistic needs through communication and available resources to promote quality cost-effective outcomes.
**Personal Learning Plan**: an approach for students that incorporate their strengths, weaknesses, and personal aspirations in making their schooling experience more relevant to their lives and ultimately more academically successful.

**Partnership**: signifies meaningful involvement in the planning, implementation, and delivery of the project.

**Vendor**: An individual, agency, organization or other entity that only provides services and is not involved in planning.

**Instructional Purposes**: The act and practice of providing instruction to program participants

**Durable Goods**: Electronic items, furniture, musical instruments, etc.

**Applicant of Record**: Is the IHE with primary responsibility for the programmatic and fiscal accountability for LPP funds endorsed by the Chief Administrative Officer.

**Certified Teacher**: a teacher who holds a state teaching certificate appropriate to his/her teaching position, including the subject area in which employed.

**Student Persistence**: Measured by taking the number of participants in the initial cohort of students in the first year of the five-year funding cycle minus students who graduate or transfer from the partner LEA(s).

**Dropout Rate**: the drop-out rate as reported to NYSED by partner LEA(s).

**Student Enrollment**: the number of students enrolled to receive services in the project.
Appendix VIII- M/WBE Documents

**M/WBE Goal Calculation Worksheet**

**Project Name:** Liberty Partnerships Program 2017-2022

**Applicant Name:** ______________________________________________________

The M/WBE participation for this grant is 30% of each applicant's total discretionary non-personal service budget over the entire term of the grant. Discretionary non-personal service budget is defined as the total budget, excluding the sum of funds budgeted for direct personal services (i.e., professional and support staff salaries) fringe benefits, indirect costs for the lead, as well as Student Stipends /Tuition if these are allowable expenditures.

For the purposes of this RFP, direct personal services exclusions apply to the expenses of the lead applicant as well as any other members of the partnership. For example, the salaries of project staff employed by the IHE, LEA and CBO partners should be excluded from the total budget, along with the lead applicant’s project staff salaries, when calculating the discretionary non-personal service budget. Therefore, lines 2-4 below will include any project salaries and fringe benefits of the lead applicant AND members of the partnership. (Please note that the indirect costs of partner organizations are not allowable expenses under this grant program.)

Please complete the following table to determine the dollar amount of the M/WBE goal for the 2017-2018 project year.

<table>
<thead>
<tr>
<th>Budget Category</th>
<th>Amount budgeted for items excluded from M/WBE calculation</th>
<th>Total (Year 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total Budget</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Professional Salaries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Support Staff Salaries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Fringe Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Indirect Costs (lead applicant only)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Student Stipends /Tuition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Sum of lines 2, 3, 4, 5 and 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Line 1 minus Line 7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. M/WBE Goal percentage (30%)</td>
<td>0.30</td>
<td></td>
</tr>
<tr>
<td>10. Line 8 multiplied by Line 9</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*This form is only for use with the Liberty Partnerships Program 2017-2022. It may not be used with any other grant program.*
M/WBE COVER LETTER  Minority & Woman-Owned Business Enterprise Requirements

NAME OF GRANT PROGRAM______________________________________________________

NAME OF APPLICANT__________________________________________________________

In accordance with the provisions of Article 15-A of the NYS Executive Law, 5 NYCRR Parts 140-145, Section 163 (6) of the NYS Finance Law and Executive Order #8 and in fulfillment of the New York State Education Department (NYSED) policies governing Equal Employment Opportunity and Minority and Women-Owned Business Enterprise (M/WBE) participation, it is the intention of the New York State Education Department to provide real and substantial opportunities for certified Minority and Women-Owned Business Enterprises on all State contracts. It is with this intention the NYSED has assigned M/WBE participation goals to this contract.

In an effort to promote and assist in the participation of certified M/WBEs as subcontractors and suppliers on this project for the provision of services and materials, the bidder is required to comply with NYSED’s participation goals through one of the three methods below. Please indicate which one of the following is included with the M/WBE Documents Submission:

- Full Participation – No Request for Waiver (PREFERRED)
- Partial Participation – Partial Request for Waiver
- No Participation – Request for Complete Waiver

By my signature on this Cover Letter, I certify that I am authorized to bind the Bidder’s firm contractually.

<table>
<thead>
<tr>
<th>Typed or Printed Name of Authorized Representative of the Firm</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Typed or Printed Title/Position of Authorized Representative of the Firm</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature/Date</th>
</tr>
</thead>
</table>
M/WBE UTILIZATION PLAN

INSTRUCTIONS: All bidders/applicants submitting responses to this procurement/project must complete this M/WBE Utilization Plan unless requesting a total waiver and submit it as part of their proposal/application. The plan must contain detailed description of the services to be provided by each Minority and/or Women-Owned Business Enterprise (M/WBE) identified by the bidder/applicant.

Bidder/Applicant’s Name ______________________________ Telephone/Email: ______________________/___________________
Address __________________________________________ Federal ID No.: ______________________________
City, State, Zip _____________________________________ RFP No.: ______________________________________

<table>
<thead>
<tr>
<th>Certified M/WBE</th>
<th>Classification (check all applicable)</th>
<th>Description of Work (Subcontracts/Supplies/Services)</th>
<th>Annual Dollar Value of Subcontracts/Supplies/Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
<td>NYS ESD Certified</td>
<td></td>
<td>$ _________________</td>
</tr>
<tr>
<td>ADDRESS</td>
<td>MBE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITY, ST, ZIP</td>
<td>WBE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHONE/E-MAIL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FEDERAL ID No.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Certified M/WBE</th>
<th>Classification (check all applicable)</th>
<th>Description of Work (Subcontracts/Supplies/Services)</th>
<th>Annual Dollar Value of Subcontracts/Supplies/Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
<td>NYS ESD Certified</td>
<td></td>
<td>$ _________________</td>
</tr>
<tr>
<td>ADDRESS</td>
<td>MBE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITY, ST, ZIP</td>
<td>WBE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHONE/E-MAIL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FEDERAL ID No.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PREPARED BY (Signature) ______________________________________________________________________________ DATE____________________

SUBMISSION OF THIS FORM CONSTITUTES THE BIDDER/APPLICANT’S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-1, 5 NYCRR PART 143 AND THE ABOVE REFERENCE SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR PROPOSAL/APPLICATION DISQUALIFICATION.

NAME AND TITLE OF PREPARER: ______________________________ (print or type) REVIEWED BY ______________________ DATE __________

TELEPHONE/E-MAIL ______________________________________________ UTILIZATION PLAN APPROVED YES/NO DATE __________

DATE ______________________________________________________ NOTICE OF DEFICIENCY ISSUED YES/NO DATE __________

NOTICE OF ACCEPTANCE ISSUED YES/NO DATE __________

M/WBE 100
**M/WBE SUBCONTRACTORS AND SUPPLIERS**

**NOTICE OF INTENT TO PARTICIPATE**

**INSTRUCTIONS:** Part A of this form must be completed and signed by the Bidder/Applicant unless requesting a total waiver. Parts B & C of this form must be completed by MBE and/or WBE subcontractors/suppliers. The Bidder/Applicant must submit a separate M/WBE Notice of Intent to Participate form for each MBE or WBE as part of the proposal/application.

<table>
<thead>
<tr>
<th>Bidder/Applicant Name: ________________________________</th>
<th>Federal ID No.: ________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address: ____</td>
<td>Phone No.: ____________________________</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>E-mail: ______________________________________</td>
</tr>
</tbody>
</table>

**Signature of Authorized Representative of Bidder/Applicant's Firm**

**Date:** ________________

**PART B - THE UNDERSIGNED INTENDS TO PROVIDE SERVICES OR SUPPLIES IN CONNECTION WITH THE ABOVE PROCUREMENT/APPLICATION:**

Name of M/WBE: ________________________________

| Address: ____________________________________ | Phone No.: ____________________________         |
|_____________________________________________|____________________________________________|
| City, State, Zip Code                         | E-mail: ______________________________________ |

**BRIEF DESCRIPTION OF SERVICES OR SUPPLIES TO BE PERFORMED BY MBE OR WBE:**


**DESIGNATION:**

- MBE Subcontractor
- WBE Subcontractor
- MBE Supplier
- WBE Supplier

**PART C - CERTIFICATION STATUS (CHECK ONE):**

____ The undersigned is a certified M/WBE by the New York State Division of Minority and Women-Owned Business Development (MWBD).

____ The undersigned has applied to New York State's Division of Minority and Women-Owned Business Development (MWBD) for M/WBE certification.

**THE UNDERSIGNED IS PREPARED TO PROVIDE SERVICES OR SUPPLIES AS DESCRIBED ABOVE AND WILL ENTER INTO A FORMAL AGREEMENT WITH THE BIDDER/APPLICANT CONDITIONED UPON THE BIDDER/APPLICANT'S EXECUTION OF A CONTRACT WITH THE NYS EDUCATION DEPARTMENT.**

<table>
<thead>
<tr>
<th>The estimated dollar amount of the agreement $__________</th>
<th>Signature of Authorized Representative of M/WBE Firm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Printed or Typed Name and Title of Authorized Representative</td>
</tr>
</tbody>
</table>

M/WBE 102
M/WBE CONTRACTOR GOOD FAITH EFFORTS CERTIFICATION (FORM 105)

PROJECT/CONTRACT # ________________________________

I, ____________________________________________________________

(Bidder/Applicant)

_____________________________________ of ______________________________________________

(Title) (Company)

_________________________ ________________________ ( ) ______________________

(Address) (Telephone Number)

do hereby submit the following as evidence of our good faith efforts to retain certified minority- and women-owned business enterprises:

(1) Copies of its solicitations of certified minority- and women-owned business enterprises and any responses thereto;

(2) If responses to the contractor's solicitations were received, but a certified minority- or woman-owned business enterprise was not selected, the specific reasons that such enterprise was not selected;

(3) Copies of any advertisements for participation by certified minority- and women-owned business enterprises timely published in appropriate general circulation, trade and minority- or women-oriented publications, together with the listing(s) and date(s) of the publication of such advertisements;

(4) Copies of any solicitations of certified minority- and/or women-owned business enterprises listed in the directory of certified businesses;

(5) The dates of attendance at any pre-bid, pre-award, or other meetings, if any, scheduled by the State agency awarding the State contract, with certified minority- and women-owned business enterprises which the State agency determined were capable of performing the State contract scope of work for the purpose of fulfilling the contract participation goals;

(6) Information describing the specific steps undertaken to reasonably structure the contract scope of work for the purpose of subcontracting with, or obtaining supplies from, certified minority- and women-owned business enterprises.

(7) Describe any other action undertaken by the bidder to document its good faith efforts to retain certified minority - and women- owned business enterprises for this procurement.

Submit additional pages as needed.

_______________________________________________
Authorized Representative Signature

_______________________________________________
Date

M/WBE 105
M/WBE CONTRACTOR UNAVAILABLE CERTIFICATION

RFP#/PROJECT NAME_____________________________________________________________________________________________________

I, ______________________________________   ______________________   ______________________________________________________

(Authorized Representative)   (Title)   (Bidder/Applicant’s Company)

_________________________________________________   __________________

(Address)   ( )   (Phone)

I certify that the following New York State Certified Minority/Women Business Enterprises were contacted to obtain a quote for work to be performed on the abovementioned project/contract.

List of date, name of M/WBE firm, telephone/e-mail address of M/WBEs contacted, type of work requested, estimated budgeted amount for each quote requested.

<table>
<thead>
<tr>
<th>DATE</th>
<th>M/WBE NAME</th>
<th>PHONE/EMAIL</th>
<th>TYPE OF WORK</th>
<th>BUDGET</th>
<th>ESTIMATED</th>
<th>REASON</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
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<td>2.</td>
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<td>3.</td>
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<td>5.</td>
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</tr>
</tbody>
</table>

To the best of my knowledge and belief, said New York State Certified Minority/Women Business Enterprise contractor(s) was/were not selected, unavailable for work on this project, or unable to provide a quote for the following reasons: Please check appropriate reasons given by each MBE/WBE firm contacted above.)

A. Did not have the capability to perform the work
B. Contract too small
C. Remote location
D. Received solicitation notices too late
E. Did not want to work with this contractor
F. Other (give reason) ____________________________________________________________

________________________________________________   __________________

Authorized Representative Signature   Date   Print Name

M/WBE 105A
REQUEST FOR WAIVER FORM

BIDDER/APPLICANT NAME: 

TELEPHONE: 

EMAIL: 

FEDERAL ID NO.: 

ADDRESS: 

CITY, STATE, ZIPCODE: 

RFP#/PROJECT NO.: 

INSTRUCTIONS: By submitting this form and the required information, the bidder/applicant certifies that Good Faith Efforts have been taken to promote M/WBE participation pursuant to the M/WBE goals set forth under this RFP/Contract. Please see Page 2 for additional requirements and document submission instructions.

BIDDER/APPLICANT IS REQUESTING (check all that apply):

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ MBE Waiver</td>
<td>A waiver of the MBE goal for this procurement is requested.</td>
</tr>
<tr>
<td>☐ Total</td>
<td></td>
</tr>
<tr>
<td>☐ Partial ________%</td>
<td></td>
</tr>
<tr>
<td>☐ WBE Waiver</td>
<td>A waiver of the WBE goal for this procurement is requested.</td>
</tr>
<tr>
<td>☐ Total</td>
<td></td>
</tr>
<tr>
<td>☐ Partial ________%</td>
<td></td>
</tr>
</tbody>
</table>

☐ Waiver Pending ESD Certification
(check here if subcontractor or supplier is not certified M/WBE, but an application for certification has been filed with Empire State Development)

Subcontractor/Supplier Name: __________________________________________ Date of application filing: ____________________________

PREPARED BY (Signature): ___________________________________________ DATE: ___________________________

SUBMISSION OF THIS FORM CONSTITUTES THE BIDDER/APPLICANT’S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 143, AND THE ABOVE REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR PROPOSAL DISQUALIFICATION.

NAME OF PREPARER: 

FOR AUTHORIZED USE ONLY

REVIEWED BY: ___________________________________________ DATE: ___________________________

WAIVER GRANTED ☐ YES ☐ NO
☐ TOTAL WAIVER ☐ PARTIAL WAIVER
☐ ESD CERTIFICATION WAIVER ☐ NOTICE OF DEFICIENCY
☐ CONDITIONAL WAIVER

COMMENTS:

M/WBE 101

83
REQUIREMENTS AND DOCUMENT SUBMISSION INSTRUCTIONS

When completing the Request for Waiver Form, please check all boxes that apply. To be considered, the Request for Waiver Form must be accompanied by documentation for items 1-11, as listed below. If a Waiver Pending ESD Certification is requested, please see Item 11 below. Copies of the following information and all relevant supporting documentation must be submitted along with the request.

1. A statement setting forth your basis for requesting a partial or total waiver.

2. The names of general circulation, trade association, and M/WBE-oriented publications in which you solicited certified M/WBEs for the purposes of complying with your participation goals.

3. A list identifying the date(s) that all solicitations for certified M/WBE participation were published in any of the above publications.

4. A list of all certified M/WBEs appearing in the NYS Directory of Certified Firms that were solicited for purposes of complying with your certified M/WBE participation levels.

5. Copies of notices, dates of contact, letters, and other correspondence as proof that solicitations were made in writing and copies of such solicitations, or a sample copy of the solicitation if an identical solicitation was made to all certified M/WBEs.

6. Provide copies of responses made by certified M/WBEs to your solicitations.

7. Provide a description of any contract documents, plans, or specifications made available to certified M/WBEs for purposes of soliciting their bids and the date and manner in which these documents were made available.

8. Provide documentation of any negotiations between you, the Bidder/Applicant and the M/WBEs undertaken for purposes of complying with the certified M/WBE participations goals.

9. Provide any other information you deem relevant which may help us in evaluating your request for a waiver.

10. Provide the name, title, address, telephone number and email address of the Bidder/Applicant's representative authorized to discuss and negotiate this waiver request.

11. Copy of notice of application receipt issued by Empire State Development (ESD).

NOTE: Unless a Total Waiver has been granted, Bidder/Applicant will be required to submit all reports and documents pursuant to the provisions set forth in the procurement and/or contract, as deemed appropriate by NYSED, to determine M/WBE compliance.
Applicant Name: __________________________________________ Telephone: ________________________________
Address: __________________________________________ Federal ID No.: ________________________________
City, State, ZIP: ____________________________________ Project No: ________________________________

Report includes:

☐ Work force to be utilized on this contract ☐

OR

☐ Applicant’s total work force ☐

Enter the total number of employees in each classification in each of the EEO-Job Categories identified.

<table>
<thead>
<tr>
<th>EEO - Job Categories</th>
<th>Hispanic or Latino</th>
<th>Race/Ethnicity - report employees in only one category</th>
<th>Not-Hispanic or Latino</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Work Force</td>
<td>Male</td>
<td>White</td>
<td>Black - African or Other Pacific Islander</td>
<td>Asian Indian or Alaska Native</td>
<td>Two or More Races</td>
</tr>
<tr>
<td>Executive/Senior Level Officials and Managers</td>
<td>Female</td>
<td>White</td>
<td>Black - African or Other Pacific Islander</td>
<td>Asian Indian or Alaska Native</td>
<td>Two or More Races</td>
</tr>
<tr>
<td>First/Mid-Level Officials and Managers</td>
<td>Professionals</td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
<tr>
<td>Professionals</td>
<td>Technicians</td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
<tr>
<td>Sales Workers</td>
<td>Administrative Support Workers</td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
<tr>
<td>Craft Workers</td>
<td>Operatives</td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
<tr>
<td>Laborers and Helpers</td>
<td>Service Workers</td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>Hispanic or Latino</td>
<td>Race/Ethnicity - report employees in only one category</td>
<td>Not-Hispanic or Latino</td>
<td>Male</td>
</tr>
</tbody>
</table>

PREPARED BY (Signature): __________________________ DATE: __________________________
NAME AND TITLE OF PREPARER: __________________________ TELEPHONE/EMAIL: __________________________
STAFFING PLAN INSTRUCTIONS

General Instructions: All Bidders/Applicants in the proposal/application must complete an EEO Staffing Plan (EEO 100) and submit it as part of the package. Where the work force to be utilized in the performance of the State contract/project can be separated out, the Bidder/Applicant shall complete this form only for the anticipated work force to be utilized on the State contract/project. Where the work force to be utilized in the performance of the State contract/project cannot be separated out, the Bidder/Applicant shall complete this form for Bidder/Applicant’s total work force.

Instructions for Completing:
1. Enter the Project number that this report applies to, along with the name, address, and federal ID number of the Bidder. Check the appropriate box to indicate if the work force being reported is just for the contract/project or the Bidder/Applicant’s total work force.
2. Enter the total work force by EEO job category.
3. Check off the appropriate box to indicate if the Bidder completing the report is the contractor or subcontractor.
4. Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in designated areas.

RACE/ETHNIC IDENTIFICATION

For purposes of this form NYSED will accept the definitions of race/ethnic designations used by the federal Equal Employment Opportunity Commission (EEOC), as those definitions are described below or amended hereafter. (Be advised these terms may be defined differently for other purposes under NYS statutory, regulatory, or case law). Race/ethnic designations as used by the EEOC do not denote scientific definitions of anthropological origins. For the purposes of this report, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. The race/ethnic categories for this survey are:

- **Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- **White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.
- **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- **Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.
- **Disabled** - Any person who has a physical or mental impairment that substantially limits one or more major life activity; has a record of such an impairment; or is regarded as having such an impairment.
## NEW YORK STATE LIBERTY PARTNERSHIPS PROGRAM APPLICATION

The Liberty Partnerships Program provides students with a range of services designed to improve academic performance and prepare for a successful transition into postsecondary education or career path.

| Date of Entry: __/__/__ | Student Name: ____________________________________________ |
| Date of Birth: __________ |

| Age: _____ | Gender: M [ ] F [ ] |
| Grade: _____ | School: ____________________________________________ |

| New York State Student Identification Number (NYSSIS #): __________________ | NYS Resident: Y [ ] N [ ] |

| Ethnicity (circle all that apply): A) Black/African-American | B) White/Non-Hispanic | C) Asian/Pacific Islander |
| D) Hispanic/Latino | E) Native American/ Alaskan Native | F) Other: __________________ |

| Address: ____________________________________________ | Telephone # __________________ |

### Parent Information

| Parent/Guardian Name: ____________________________ | Home Phone: __________________ |
| Address: ____________________________________________ |

| Cell Phone: __________________ | Work Phone: __________________ | E-mail address __________________ |

### Emergency Contact Information

| Name: ____________________________ | Home Phone: __________________ |
| Cell Phone: __________________ | Relationship to student: __________________ |

| Address: ____________________________________________ |

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**NOTE:** It is required that each student participant have a signed application form on file in order to be eligible to participate in the Liberty Partnerships Program. This form serves as a suggested template— it may be customized/ modified but must contain at least all of the elements in the sample provided.
Authorization for Participation & Access to Student Records

By signing this form the student and parent/guardian agree to the following:

I (parent/guardian) _________________________ ______________ give permission for (student name)_______________________ to participate in the Liberty Partnerships Program. I understand that this form grants the Liberty Partnerships Program permission for the following:

- Obtaining and reviewing, certain confidential educational record (s), information, or data that may be protected under State and Federal law including, but not limited to, the Family Educational Rights and Privacy Act and New York State Education Law §2-d which includes but are not limited to report cards, transcripts, attendance records, discipline referrals and college acceptance letters.
- Utilizing such confidential educational record (s) in planning appropriate support services for my son/daughter. I (we) understand that all information obtained will remain confidential.
- I (we) also give permission for my son/daughter to participate in program related activities. Offsite activities will require a signed permission slip.

I (student name)____________________ have read and been provided a copy my Liberty Partnership Program’s Code of Conduct and will abide by all rules and requirements within it while participating in all Liberty Partnership activities on school property and while attending all off site activities.

I (student name)____________________ understand that belonging to the Liberty Partnership Program carries with it a commitment of time and hard work. I will fully commit to putting forth my best effort so that I can reach my fullest potential as a student.

Student Signature: ___________________________________________ Date ___/___/_____

Parent/ Guardian Signature: _______________________________________ Date ___/___/_____

This form must be signed by at least one parent/guardian who is legally responsible for the child.

Office Use Only

Reviewed by: ___________________________________ Staff Name ___________________________ Staff Signature ___________________________ Date

Eligibility Factor (circle all that apply):  A     B     C     D     E     F     G     H     I     J     K    L

Accepted [ ] Denied [ ] Wait List [ ]

Signature (Project Director): ___________________________________________ Date: _____________________