



RFP NO. 15099
SERVICE PROVIDER PROPOSAL FORM

BIDDER INFORMATION:

Name: _____
 FEIN or SSN: _____
 Address: _____

 Contact: _____
 Telephone: Number: _____
 Email Address: _____

SERVICE BEING BID:

Please identify the type of service that you are bidding to provide by placing an (X) next to the appropriate box below. (You may bid to perform more than one type of service, but you must do so by completing separate forms.)

<input type="checkbox"/>	Employer/Sector Partnership	<input type="checkbox"/>	Program Alignment
<input type="checkbox"/>	Program Efficiency	<input type="checkbox"/>	Transfer/Articulation
<input type="checkbox"/>	DACUM (Developing A Curriculum)	<input type="checkbox"/>	Technical Program
<input type="checkbox"/>	Course/Curriculum Development	<input type="checkbox"/>	Developmental Education
<input type="checkbox"/>	Prior Learning Assessment	<input type="checkbox"/>	Student Recruitment
<input type="checkbox"/>	Student Support	<input type="checkbox"/>	Work-Based Training/Job Placement
<input type="checkbox"/>	Facilitation	<input type="checkbox"/>	Data Analytics
<input type="checkbox"/>	Web Design	<input type="checkbox"/>	Contract Development
<input type="checkbox"/>	Programmatic/Administrative Monitoring	<input type="checkbox"/>	Research
<input type="checkbox"/>	Technical Writing	<input type="checkbox"/>	Measurement/Accountability
<input type="checkbox"/>	Project Management/Continuous Improvement	<input type="checkbox"/>	Marketing
<input type="checkbox"/>	Public Relations	<input type="checkbox"/>	Fundraising

QUALIFICATIONS AND EXPERIENCE:

Please use the box below to describe your qualifications and experience to provide the service you have identified. As part of your description, please identify at least two examples where you provided the identified service. Describe briefly what you did and the outcome. You may NOT exceed the space provided below. This includes changing fonts or font sizes to accommodate additional text.

TECHNICAL PROGRAM SPECIALIZATIONS:

Please identify technical program areas in which you are qualified to perform work if you selected employer/sector partnership, program alignment, DACUM, technical program, or course/curriculum development as the service for which you are bidding by placing an (X) next to the appropriate box(es) below.

<input type="checkbox"/>	Advanced Manufacturing/Mechatronics	<input type="checkbox"/>	Energy Technology
<input type="checkbox"/>	Information Technology	<input type="checkbox"/>	Construction Technology
<input type="checkbox"/>	Allied Health	<input type="checkbox"/>	Other (Please describe clearly below):

Provide a brief description of your qualifications and/or experience in the technical program specialization(s) you have identified. You may NOT exceed the space provided. This includes changing fonts or font sizes to accommodate additional text.

DEVELOPMENTAL EDUCATION SPECIALIZATIONS:

Please identify developmental education program areas in which you are qualified to perform work if you selected developmental education as the service for which you are bidding by placing an (X) next to the appropriate box(es) below.

<input type="checkbox"/>	Mathematics	<input type="checkbox"/>	English
<input type="checkbox"/>	Reading	<input type="checkbox"/>	Writing

Provide a brief description of your qualifications and/or experience in the developmental education specialization(s) you have identified. You may NOT exceed the space provided. This includes changing fonts or font sizes to accommodate additional text.

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COURSE/CURRICULUM DEVELOPMENT SPECIALIZATIONS:

If you selected course/curriculum development as the service for which you are bidding and have specialized skills in one of the categories identified below, placing an (X) next to the appropriate box(es).

Web-based/blended course design	Simulations
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Provide a brief description of your qualifications and/or experience in the course/curriculum development specialization(s) you have identified. You may NOT exceed the space provided. This includes changing fonts or font sizes to accommodate additional text.

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REFERENCES:

Please identify three references who can attest to your qualifications and experience for the service being bid and describe briefly the context(s) in which you worked with the reference. You may NOT exceed the space provided. This includes changing fonts or font sizes to accommodate additional text.

Name: _____
Organization: _____
Telephone: Number: _____
Email Address: _____

Name: _____
Organization: _____
Telephone: Number: _____
Email Address: _____

Name: _____
Organization: _____
Telephone: Number: _____
Email Address: _____

POTENTIAL CONFLICTS OF INTEREST:

Please indicate whether you have any potential conflicts of interest by marking the appropriate box with an (X). If you do (e.g., you have a spouse who works for one institution), please attach a brief explanation of the conflict to your proposal.

Yes No

PRICING:

Please provide time-based pricing at an hourly or daily rate for all people (or positions or roles) you expect to perform work under an open-end contract. Additionally, you may provide activity-based pricing for discreet and well-defined activities that you or your organization performs regularly and that are readily quantifiable/measurable (e.g., a six-hour day of facilitation, including preparation and follow-up activities). If you use a position or role as the basis for time-based pricing or provide activity-based pricing, please ensure that your description of the position, role, or activity is clear. You may use the form below or provide pricing on a separate page or pages that capture(s) clearly the general information sought below.

Time-Based Pricing¹

Person/Position/Role	Hourly Rate	Daily Rate

Activity-Based Pricing

Activity	Rate

_____ *Bidder*

_____ *Date*

¹ WVCTCS and its institutions reserve the right to negotiate flat-rate or reduced pricing for specific services.