



**Office of Temporary
and Disability Assistance**

Release Date: 02/05/16

Request for Proposals

**Services to Cuban/Haitian
Entrants Program**

Submission Deadline: 03/09/16

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PART A – RFP SUMMARY INFORMATION

I. Introduction

The New York State Office of Temporary and Disability Assistance (OTDA) Bureau of Refugee and Immigrant Assistance (BRIA) issues this Request for Proposals (RFP) to award two 54-month contracts to provide services to Cuban and Haitian entrants and refugees.

All program funds are received from the federal Office of Refugee Resettlement (ORR). OTDA/BRIA anticipates distributing approximately \$751,000 in Services to Cuban and Haitian Entrants discretionary grant funds under this procurement. All program funds are subject to continued availability and State appropriation thereof. OTDA/BRIA intends to award one contract for service delivery in each of the following eligible counties: Monroe and Onondaga. As determined by the federal ORR, these are the two counties with the highest concentration of Cuban and Haitian entrants and refugees in New York State.

Use of these funds must relate to service provision to Cuban and Haitian entrants and refugees and be designed to maximize service potential in specific geographical regions to increase positive outcomes in:

- Obtaining immigration status documentation
- Filing for adjustment of status
- Accessing immigration legal services
- Addressing language barriers

The deadline for receipt of proposals is Wednesday, March 9, @ 2:00 p.m. EST in the Grants Gateway. See page 6 for additional information.

Eligible applicants must complete and submit all forms, narratives and relevant attachments required by this RFP and all required/applicable attachments (see Part B on page 24).

- Only proposals submitted by Eligible Grant Applicants, as defined on page 7 (PART A, Section V) of this RFP, will be accepted for review.
- Only proposals that serve Eligible Participants, as defined on page 9 (PART A, Section VII) of this RFP, will be accepted for review.

If selected, the proposal and all parts of it submitted in response to this RFP may become part of a contract with OTDA, subject to approval by the New York State Attorney General and the Office of the State Comptroller. At the time of contract development, awardees will be required to submit additional payment schedules, program information and any revised M/WBE forms and documents for the final contract. Successful grantees will be required to submit all final contract documents, narratives and payment schedules electronically, with the exception of documents requiring an original signature. OTDA/BRIA reserves the right to negotiate any aspect of a proposal other than rates of payment in order to ensure that the final agreement meets OTDA/BRIA objectives and requirements.

PREQUALIFICATION REQUIREMENT

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 at <http://www.grantsreform.ny.gov/Grantees>.

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 2:00 PM on 3/09/2016 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 New York State Prequalification System for Grants Contract Vendors Prequalification Manual (A Resource Manual and User's Guide for Not-for-profit Vendors) on the Grants Reform Website details the requirements and an Streamlining State Grant Processes online tutorial 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. 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 link from the main log in page and follow the prompts.

2) Complete your Prequalification Application.

- Log in to the Grants Gateway. **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 the OTDA prequalification representative, Rick Umholtz at Richard.Umholtz@otda.ny.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.

II. Procurement Schedule/Submission Guidelines

(OTDA/BRIA reserves the right to modify the dates as necessary)

Release Date of the Request for Proposals.....	February 5, 2016
Deadline for Written Questions.....	February 15, 2016
Response to Questions.....	February 22, 2016
Due Date and Time for Proposals.....	March 9, 2016, 2pm EST
Anticipated Notification of Awards.....	May 13, 2016
Anticipated Contract Start Date.....	September 1, 2016

QUESTIONS AND ANSWERS REGARDING THIS RFP

Prospective applicants may submit questions via fax, email or postal correspondence to the individual and address below. Questions must be submitted no later than 5:00pm on February 15, 2016 to:

Julie Atwood
New York State Office of Temporary and Disability Assistance
Bureau of Refugee and Immigrant Assistance
40 North Pearl Street, 10th Floor, Section C
Albany, New York 12243-0001
Fax: (518).473-8698
Email: Julie.Atwood@otda.ny.gov

OTDA/BRIA will respond in writing to questions by February 22, 2016. A written copy of the questions and answers will be either mailed or e-mailed to applicants who request one. Questions and answers will be posted on the OTDA's website on the *Contracts and Grants Opportunities* web page, located at <http://otda.ny.gov/contracts/>

OTDA/BRIA reserves the right to respond to questions submitted after the deadline.

PROPOSAL SUBMITTAL

Applications must be submitted electronically via Grants Gateway at <https://grantsgateway.ny.gov> by March 9, 2016, by 2:00pm EST. Applicants are strongly encouraged to complete the electronic application submission process several days before the application due date to ensure the application is successfully accepted by <https://grantsgateway.ny.gov>. Applicants should consider that the application due date will have a high volume of submissions, which may slow down State systems and increase the time needed for applications to be received by <https://grantsgateway.ny.gov>. Applicants must take this processing time into consideration by allowing enough time to enter submissions so that the application is submitted error-free by the deadline. **Any proposal received after the deadline may be reviewed at the discretion of OTDA/BRIA. OTDA/BRIA will not accept mailed proposals, faxed proposals, or proposals sent via electronic mail.**

III. Federal Authority

The federal Office of Refugee Resettlement (ORR) is authorized to grant funds to states for the Refugee Social Services Program (RSSP) pursuant to the Refugee Act of 1980, under the authority of Sections 412(c) (1) (B) of the Immigration and Nationality Act (INA) (8 U.S.C. 1522(c) (1) (B)), as amended (Public Law 96-212) and further amended by the Refugee Assistance Amendments of 1982 (Public Law 97-363) and Title 45 of the Code of Federal Regulations, parts 400 and 401. The RSSP is found under Catalog of Federal Domestic Assistance (CFDA), No. 93.566, of the Department of Health and Human Services (DHHS) program title, Refugee and Entrant Assistance - State Administered Programs.

Cuban Haitian Program funding is a set-aside allocation of the Federal Fiscal Year quarterly RSSP allocation. States receiving funds for Cuban Haitian entrants shall direct funding towards individuals most in need of additional support, including, but not limited to the newly arrived, individuals without voluntary agency support or the long-term unemployed and unintegrated who are unable to access adequate services through mainstream assistance.

More information can be found at the following websites:

<https://www.cfda.gov>

<http://www.acf.hhs.gov/programs/orr/policy#legislative.html>

<http://www.acf.hhs.gov/programs/orr/resource/state-letter-15-09>

IV. Program Description

Purpose

The New York State (NYS) Office of Temporary & Disability Assistance (OTDA), Bureau of Refugee and Immigrant Assistance (BRIA) is proposing a 54-month program to assist eligible Cuban/Haitians to navigate through the immigration process in order to ensure a path to self-sufficiency.

The Services to Cuban/Haitian program has the following key objectives:

- Improve access to accredited immigration services;
- Access to appropriate English language training;
- Increase community education; and
- Increase the capacity of local service providers.

To accomplish these specific objectives, the Cuban/Haitian Entrant program:

1. Provides outreach to eligible Cuban/Haitians as potential participants in the program;
2. Addresses service issues facing eligible Cuban/Haitians, given their lack of immigration documents, limited English proficiency, native language literacy and limited work history; and
3. Assists with the process by which eligible Cuban/Haitian obtain necessary immigration and work documents as well as helping with legal processes.

V. Eligible Grant Applicants

Eligible applicants include public agencies, county or municipal governments, or any subdivision thereof; not-for-profit corporations, including charitable organizations incorporated, registered and in good standing with the Charities Bureau of the Attorney General in the State of New York; faith based organizations and educational institutions. In addition, eligible applicants must meet one of the following criteria:

- Have an immigration attorney on staff OR
- Be a Board of Immigration Appeals (BIA) recognized agency with accredited representative on staff, OR
- Be in the process of receiving BIA recognition/accreditation.

Prospective applicants who want to verify their status as a charitable organization should contact the Office of New York State Attorney General, Charities Bureau at 1(800)771-7755 or on the internet at: <http://www.oag.state.ny.us>.

Eligible applicants must be located in and do business in New York State.

OTDA/BRIA 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/vendor_index.htm or go directly to the VendRep System online at <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 ITServiceDesk@osc.state.ny.us.

VI. Service Strategy

Cuban and Haitian communities may not be aware of the services available to assist them with the immigration process. The language barriers they face also impede their ability to become naturalized citizens and their path to self-sufficiency. Therefore, culturally and linguistically appropriate outreach services are necessary to educate these communities and to empower them to seek out services of which they may not otherwise be aware.

Cuban and Haitian communities benefit from an educational program with an overview of the immigration process. Services to facilitate the immigration process addressing the barriers associated with the lack of English skills are strongly urged. The proposed program should provide information about the immigration process coupled with access to immigration assistance either through an attorney, a BIA accredited representative, or other agency staff in order to encourage Cubans and Haitians to seek out adjustment in their immigration status.

Through this RFP, OTDA/BRIA intends to provide services to eligible Cubans and Haitians in the two most heavily impacted counties, Monroe and Onondaga. OTDA/BRIA seeks to award one contractor in each of the counties.

Program staff of the successful applicants will:

- Outreach to the affected communities by hosting informational workshops/seminars, mass mailing and one time print media advertisements or articles such as flyers and brochures that detail the program's available services. Information shared about the program must be accurate and easily understandable. Therefore, program information must be translated into Spanish and/or Haitian Creole to accommodate existing language barriers;
- Conduct community education sessions explaining the program and the benefits of pursuing status adjustment. These sessions will be interactive, using culturally appropriate materials translated into Spanish and/or Haitian Creole;
- Deliver immigration assistance appropriate for the major needs of the population, including adjustment of status, documentation, parole issues, court proceedings, naturalization and Employment Authorization Document (EAD) concerns. It will also help participants who have unique issues as they arise. Immigration Assistance will be provided by either an attorney with knowledge and experience in immigration law or a BIA Accredited Representative; and
- Offer ESL, civics and literacy instruction in traditional classroom settings, but must be flexible enough to accommodate the needs of participants. For example, a community education model which may include distance learning, workplace instruction or small group settings at community centers, may be used. Classes will have an open enrollment policy which allows working members of the communities or those with busy family schedules an opportunity to participate as their schedule will allow thus ensuring flexibility towards achieving 75% completion rate. An ancillary goal of this program offering is to increase the current English language ability of participants by one level. All ESL classes must be taught by New York State Certified ESL instructors.

VII. Eligible Participants

Program Funds must be used for services to an individual from Cuba or Haiti who meet the following eligibility requirements:

- A refugee, admitted under Section 207 of Immigration Naturalization Act (INA);
- A Cuban or Haitian Entrant (as defined in subdivision (e) of Section 501 of the Refugee Education Assistance Act of 1980); and
- A Parolee admitted as a refugee under section 212(d) (5) of the Immigration and Nationality Act (INA).

VIII. FUNDING LIMITATIONS AND PROVISIONS

AVAILABLE FUNDS

Anticipated allocations and future continuations of contracts are subject to continued availability of federal funds and state appropriation of the funds thereof. Only federal funds designated for the Cuban/Haitian Entrant program are available through this RFP. It is estimated that approximately \$751,000 will be made available through this procurement for the 54-month contract term. Approximately \$83,500 will be made available for the first 6 months, beginning September 1, 2016.

DISTRIBUTION OF FUNDS

Through this RFP, OTDA/BRIA intends to select two service providers or entities to operate under this program model. Only one applicant will be awarded from each of the two eligible counties, Monroe and Onondaga.

OTDA/BRIA will award all of the available funds to the highest scoring proposal from each of the eligible counties.

If the two highest scoring proposals' award request is less than the total available funds, OTDA/BRIA reserves the right to distribute the remaining available funds equally between the top bidders from each eligible county. In the event there is only one bidder from only one eligible county, all available funds will be distributed to the sole bidder in that county.

OTDA/BRIA, however, reserves the right to distribute funds as OTDA/BRIA deems necessary to meet the goals of this RFP.

OTDA/BRIA reserves the right to re-distribute the funds based on emergent needs, as well as, available demographic data. These decisions will be made in order to serve the greatest number of eligible Cubans and/or Haitians in an area.

Initial contract term awards and first budget period award are the result of this competitive procurement. During the contract term, however, subsequent budget period awards (see budget period explanation below) may vary based on available funding, continuing need, and satisfactory contractor performance, as evidenced by voucher claims and program monitoring.

When making subsequent budget awards, OTDA reserves the right to do any of the following:

- Reallocate funds from area to another area;
- Reallocate funding from contractor to contractor;
- Suspend a budget period award to underperforming contractor;

- Award a lesser budget period award than was awarded in a previous budget period(s) to an underperforming contractor; and,
- Award a higher budget period award than was awarded in a previous budget period(s) to an over-performing contractor, due to an increased need for services.

CONTRACT TERM and BUDGET PERIODS

This RFP governs the provision of funds for the anticipated 54-month contract term, September 1, 2016 to February 28, 2021. A multi-year Work Plan will be required for the 54-month term. The contract will initially require two performance based budget summaries; one for the contract's full 54-month multi-year term and one for the first 6-month budget period. A budget summary includes the number of contract outcomes to be achieved through delivery of allowable services and the rate of payment for each positive outcome.

During the course of the multi-year contract term, funds will be made available to the contractor for each pre-established annual budget period. A 6-month payment schedule will be required for the first budget period and a 12 month payment schedule will be required for subsequent budget periods. BRIA anticipates that there will be five budget periods within the contract term as follows:

- Budget Period I: September 1, 2016 to February 28, 2017
- Budget Period II: March 1, 2017 to February 28, 2018
- Budget Period III: March 1, 2018 to February 28, 2019
- Budget Period IV: March 1, 2019 to February 29, 2020
- Budget Period V: March 1, 2020 to February 28, 2021

The contract term and the availability of funds are subject to change based on the continued availability of Federal funds and contingent on sufficient appropriation authority in the enacted State Budget. OTDA reserves the right to terminate contracts at any time if the funding is not available.

IX. Program Information

PERFORMANCE BASED CONTRACTS

Contracts resulting from this procurement will be performance-based. Contractors will not be reimbursed for line-item expenses. Compensation is directly tied to the completion of deliverables/outcomes or "payment points." Documentation of the provision of a "task" (allowable service) or a number of tasks to a participant allows a contractor to claim achieved deliverables/outcomes. The contractor is paid for the deliverables/outcomes at the established rate, as defined in the contract.

The applicant's award request is calculated by multiplying the rates for each deliverable/service outcome by the units to be achieved per deliverable/service outcome.

An example of the worksheet (Attachment B-2 Performance Based Budget Summary) that will be used to calculate these costs is included in Part B and performance based budget summaries for a 6-month payment schedule for the first budget period and a 12 month payment schedule which will be required for subsequent budget periods; and upload a completed Attachment B-2, Performance Based Budget Summary, to calculate costs of the proposed 54-month program.

Contractors' performance data, along with allocation data such as award amounts, contract periods, program sites, service locations, and spending information may be posted on OTDA's web site as required.

PAYMENT RATES

The following chart provides information regarding the payment rate caps for the deliverables/outcomes that an agency will provide. These are the maximum rates per deliverable/outcome that OTDA will reimburse for services under this RFP.

DELIVERABLE/OUTCOME	RATE
OUTREACH	\$350.00
ORIENTAITION/COMMUNITY EDUCATION	\$1050.00
IMMIGRATION ASSISTANCE	\$325.00
ESL/CIVICS/LITERACY	\$375.00

DELIVERABLES/OUTCOMES

The parameters and documentation requirements for each deliverable/outcome are provided on the following charts. The applicant should use this information to project service levels and allocate funds to each category of deliverable/outcome.

In the event of federal regulation or rule changes that affect the deliverable/outcome, budget category/deliverable and/or tasks in the chart below, contractors will be notified of the change(s) and will be required to comply with the new requirements.

Deliverable/ Outcome	Objective	Tasks	Documentation Requirements
Outreach	<p>Organized events/activities to inform, educate, and assist the target population to access program services.</p> <p>The total dollars allocated may not exceed 5% of the total award requested.</p> <p>Outreach is a non-client specific payment point.</p>	<p>The completion of one organized event or activity allows the contractor to claim one Outreach payment point.</p> <p>Allowable services:</p> <ul style="list-style-type: none"> • Information workshop/seminar • Mass mailing • Targeted one-time print media advertisement/article 	<ul style="list-style-type: none"> • Copy of the agenda of the information workshop/seminar including the date, time, location and staff person conducting the workshop/seminar <p>Or</p> <ul style="list-style-type: none"> • Copy of the letter sent in mass mailing and the mailing list <p>Or</p> <ul style="list-style-type: none"> • Copy of the published advertisement/article
Orientation/Community Education	<p>An organized group event to familiarize clients with documentation requirements, the immigration process, and/or other services available to them.</p> <p>Orientation/Community Education will include the following topics:</p> <ul style="list-style-type: none"> •Immigration Documentation •Adjustment of Status •Employment 	<ul style="list-style-type: none"> • The completion of one orientation allows the contractor to claim one Orientation/Community Education payment point 	<ul style="list-style-type: none"> • The sign in sheet from the orientation which includes the date, time, location and staff person conducting the orientation

	<p>Authorization</p> <ul style="list-style-type: none"> •Temporary Protected Status (Haitians Only) •Naturalization •Deferred Action <p>A minimum of four orientations per budget period is suggested</p> <p>Orientation is a non-client specific payment point</p>		
<p>ESL/Civics/Literacy</p>	<p>Completion of ESL and/or Civics and/or Literacy course by an enrolled client.</p> <p>ESL/Civics/Literacy is a client specific payment point</p>	<p>Individual's attendance of at least 75% of one of the following allows the contractor to claim one ESL/Civics/Literacy payment point.</p> <p>Allowable services:</p> <ul style="list-style-type: none"> •ESL Course •Civics Course •Combined ESL/Civics Course •Literacy Course <p>Payment limit: Six (6) payment points per individual per contract term may be claimed</p>	<ul style="list-style-type: none"> • Application for Services signed and dated by both the client and agency representative once the application is complete and prior to services being provided. The agency supervisor must sign and date the application within 30 days of the client and agency representative signatures, or prior to submission of a voucher – whichever date is earlier. • Proof of immigration status* • A copy of the class attendance sheet which includes the date, time, location and staff person conducting the class for each date that the enrolled client attended. • A case note documenting the 75% attendance.

Immigration Assistance	<p>Immigration Assistance must be provided by one of the following:</p> <ul style="list-style-type: none"> •Attorney •BIA Accredited Representative •Other appropriate staff working under the supervision of an Attorney or BIA accredited representative <p>Immigration Assistance is a client specific payment point</p>	<p>The completion of one allowable service to an individual to address legal or immigration status issues allows the contractor to claim one Immigration Assistance payment point.</p> <p>Allowable services:</p> <ul style="list-style-type: none"> •Consultation about an individual's immigration status or any other immigration related issues requiring services. •Intervention on behalf of the individual regarding their immigration status or any other immigration related issues requiring some type of communication with USCIS 	<ul style="list-style-type: none"> •Application for Services signed and dated by both the client and agency representative once the application is complete and prior to services being provided. The agency supervisor must sign and date the application within 30 days of the client and agency representative signatures, or prior to submission of a voucher – whichever date is earlier. •Proof of immigration status* •A detailed case note entry documenting completion of services provided to the individual.
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*** Proof of immigration status of each program participant is required prior to vouchering.**

ADDITIONAL DELIVERABLE/OUTCOME INFORMATION

Outreach

- Outreach is measured by the number of instances of outreach rather than the number of persons reached.
- Information workshops/seminars in the form of home or office visits are not allowed.

Orientation/Community Education

- Orientation/Community Education is defined as holding organized group events to familiarize clients with documentation requirements, the immigration process, and/or other services available to them. Orientation/Community Education cannot be a home or office visit with the client.

ESL/Civics/Literacy

- Referrals are not considered an achievement of the payment point.
- The course must be provided directly by funds awarded under this contract.
- The proposal must specify the total number of sessions within a course as well as the course start and end dates.
- Payment for this payment point is limited to individuals 18 years of age and over.

Immigration Assistance

- Making a referral is not considered an achievement of the payment point. You must directly provide one allowable service to claim one payment point

X. Selection Process

Proposals should contain all items as indicated in Part B, the Application Package. Failure to provide any items will result in a decrease of the total score. Factors considered in arriving at a total score include:

- The applicant's experience with, and knowledge of, specific cultural and linguistic needs of the eligible service population;
- Sufficient proposed project staff, in numbers and qualifications;
- The applicant's demonstrated ability to provide effective service programming in New York State;
- The applicant's distribution of outcomes in the budget summaries; and,
- The applicant's payment point summaries that reflect the overall intent of the program.

Each proposal will be read and scored by two reviewers from OTDA. All scores will be averaged and the average scores will be ranked from highest to lowest in each county. Proposals will be reviewed in accordance with the scoring criteria referenced below.

OTDA/BRIA reserves the right to conduct site visits and solicit the opinion of applicants other funding sources prior to making a funding decision.

Each proposal will be scored on an established evaluation form. Points will be awarded as shown below.

Technical Evaluation	Maximum Points
Agency Experience & Capacity	15
Target Population & Need for Assistance	15
Program Description & Implementation	45
Financial Evaluation	
Budget Summaries	20
Audited Financial Statement	5
Total	100

If additional funding becomes available or if circumstances otherwise allow OTDA/BRIA to fund additional contractors, OTDA/BRIA reserves the right to reconsider any eligible proposals submitted in response to this RFP using the same scoring criteria and award methodology. Updated information may be requested as deemed necessary by OTDA/BRIA. OTDA/BRIA also reserves the right to issue a new RFP at any time during the contract term to solicit new proposals.

XI. Award Procedures

CONTRACT DEVELOPMENT PROCESS

OTDA/BRIA will begin the contract development process with successful applicants after the awards have been announced. The successful applicants may be asked to provide updated work plans and performance based budget summaries that specify the services to be delivered, project goals, deliverables/outcomes, claiming process, and other information. The contract will include standard terms and conditions such as the confidentiality of records, restrictions on publications, and standard contract

termination clauses The contract will constitute a legal agreement between the selected applicant and the State of New York and will be in effect for the full period of the contract term.

The contracts will have a term of 54 months and will contain work plans and performance based budget summaries reflecting goals and objectives for the 54 month time period, as well as, a 6-month payment schedule which will be required for the first budget period and a 12 month payment schedule which will be required for subsequent budget periods.

PAYMENT

The contractor will not be reimbursed for line item expenses. Under performance-based contracts, the contractor will be paid for achieving specified deliverables/outcomes described herein. Payment will be made only for deliverables/outcomes for which positive outcomes are documented and for appropriately completed and submitted vouchers.

No payments will be made until the contract is fully executed and signed by the State Comptroller and the State Attorney General. Once the contract has been fully executed by OTDA (signed and approved by OTDA, the State Attorney General and the Office of the State Comptroller), OTDA may, at its discretion, advance up to 25 percent of the first budget period amount, if requested and if deemed appropriate by OTDA/BRIA. There will be no advances for subsequent budget periods. Contractors will work at their own risk if they conduct program activities before the contract is fully executed.

XII. Records and Record Keeping

RECORD KEEPING

The Contractor must maintain current and accurate fiscal and accounting controls to support the claims for deliverables/outcomes claimed under the contract. Records must adequately identify revenue sources and expense items for all contract activities. Accounting records must be supported by clear documentation for all funds received and disbursed. Records must be retained and be accessible for a period of six years from the end of the contract or last payment or last contract transaction.

However, if any claim, audit, litigation, or State/Federal investigation is commenced before the expiration of the aforementioned record retention period, the records must be retained by the contractor until all claims or findings regarding the records are finally resolved. OTDA/BRIA or its designee shall have access to any records relevant to the project (including but not limited to books, documents, photographs, correspondence, and records), for audits, examinations, transcripts, and excerpts. If OTDA/BRIA determines that such records possess long-term or historic value, they must be transferred, upon request, to OTDA/BRIA.

If a selected contractor expends \$750,000 or more in Federal funds during any one fiscal year, the contractor will be subject to the audit requirements and provisions of OMB Super Circular, found in Federal regulations at 2 CFR Part 200 (Subparts A – F) - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; and all other audit requirements determined applicable by the OTDA/BRIA. Appendix A1 of the Contract document reviews specific audit requirements.

REPORTING AND VOUCHERING REQUIREMENTS

The BRIA Information Network (BIN) is the required method to be used by contractors to report individual participant data and contract performance, and to prepare claims for payment.

The contractor must have sufficient equipment and a system environment to use the BIN system, as follows:

- The WEB browser Microsoft Internet Explorer (version 8.0 or greater). This is free and can be downloaded from the Microsoft website;
- Internet service (via DSL, Cable Modem, Dial-up, etc.);
- Desktop computer(s) or laptop computer(s) with internet access; and,
- Laser Printer.

Contractor staff, including fiscal staff, should have computers capable of accessing BIN.

Reports and vouchers must be submitted by the contractor on a quarterly basis during the contract term, unless otherwise specified. Payments will be based on vouchers and any necessary documents that support the deliverables/outcomes in the performance based budget summary. Additional reporting, as may be determined by OTDA/BRIA, may also be required. Participant-specific deliverables/outcomes require a Social Security Number (SSN) to be entered into BIN to claim deliverables/outcomes for allowable services provided to a participant.

Final reports and vouchers, known as "close-out" vouchers, are due within 60 days after the completion of, or termination of, the contract.

BIN provides contractors and subcontractors access to individual participant application for services, family self-sufficiency, and individual service plan screens for the purposes of screening and enrolling applicants, establishing financial targets for employment outcomes (if applicable), and developing service plans. A participant's service history with any OTDA/BRIA contractor will be made available to contractor/subcontractor intake staff to assist in data collection and in determining the potential for payment for service outcomes for the participant.

The contractor must enter performance information into BIN as participant outcomes are achieved. The contractor may review and approve subcontractor's performance information in the BIN system.

After the end of a contract quarter, the contractor generates from BIN voucher forms with the payment claims amount for contractor review and subsequent submission to BRIA for payment. In addition to BIN generated reports, backup documentation must be maintained on site by the contractor and must be accessible for review by OTDA/BRIA at any time.

BIN generates the Claim for Payment, Program Service Report, and Comprehensive Program Report, all of which must be submitted to OTDA/BRIA on a quarterly basis.

CASE RECORDS

The contractor must adhere to OTDA/BRIA instructions regarding case records as stated in the contract and in related OTDA/BRIA manuals, directives, and other forms of notification. The dates of service recorded in BIN must be consistent with the actual service dates recorded in the case record.

MONITORING

OTDA/BRIA will monitor projects on a regular basis throughout the life of the contract. Monitoring may include site visits, regular telephone contact and/or discussions of monthly progress reports. The goals of project monitoring are to ensure that the terms of the contract are being met and to provide technical assistance, where necessary, to help the contractor meet these terms. OTDA/BRIA reserves the right to conduct site visits and make telephone contact to subcontractors as a means of monitoring the prime contractor's performance.

Monitoring activities will concentrate on proper documentation of claims in the contractor's case records for each participant or service claimed.

AMENDMENTS TO THE CONTRACT

Amendments and modifications of executed contracts are sometimes necessary to accommodate the needs of both the contractor and OTDA/BRIA. These changes, which must be by mutual written agreement, may include modification to reimbursement schedules, time and money amendments, or no-cost extensions as necessary. Contract modifications, including amendments and no-cost time extensions, will be made at the discretion of the OTDA/BRIA and in certain instances with the approval of the Attorney General and the Office of the State Comptroller. Rates cannot be changed, except for possible annual adjustments based on the consumer price index increase at the discretion of OTDA/BRIA.

XIII. General terms and Conditions

NYS OTDA/BRIA reserves the right to terminate in whole or in part, or modify the contract at its discretion or due to the unavailability of funds.

If additional funding becomes available, OTDA/BRIA reserves the right to subsequently reconsider eligible proposals submitted in response to this RFP at that time, using the same scoring criteria and award methodology. Updated information may be requested as deemed necessary by OTDA/BRIA. OTDA/BRIA also reserves the right to issue a new RFP to solicit new proposals.

The terms and conditions for all funded projects are specified in a detailed contract which must be signed by OTDA and approved by the New York State Attorney General Office and the Office of the State Comptroller before any work has begun or payments are made. The successful applicant will be sent the complete standard contract for execution. The Applicant is encouraged to review sections of the contract that are attached before submitting an application.

It is the policy of OTDA to encourage the employment of qualified applicants/recipients of public assistance by both public organizations and private enterprises that are under contractual agreement with OTDA for the provision of goods and services. OTDA may require the Contractor to demonstrate how the Contractor has complied or will comply with the aforesaid policy.

The contractor will be required to comply with all applicable Federal and State laws and regulations.

The contract award will be made to the applicants whose proposals are determined to best meet the criteria for proposal evaluation and selection set forth in this RFP.

Any contract awarded pursuant to this RFP will be subject to the Office's processing procedures for contracts of this type, including approval as to form by the State's Attorney General, and as to award by the NYS Division of Budget and by the NYS Office of the State Comptroller.

This RFP does not commit OTDA to award any contracts to pay the costs incurred in the preparation of a response to this RFP, or to procure or contract for services.

OTDA/BRIA reserves the right to amend, modify or withdraw this RFP and to reject any proposals submitted, and may exercise such right at any time without notice and without liability to any applicant or other parties for any expenses incurred in the preparation of a proposal.

This RFP and any contract resulting from this RFP is subject to all applicable laws, rules and regulations promulgated by any Federal and State authority having jurisdiction over the subject matter thereof.

OTDA/BRIA reserves the right to seek clarifications and revisions of proposals and to 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.

OTDA/BRIA reserves the right to 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. OTDA/BRIA reserves the right to use any and all ideas submitted in the proposals received.

OTDA/BRIA reserves the right to award contract(s) to as many or as few applicants as it may select, and reject all proposals which do not conform to the instructions given in the RFP. OTDA/BRIA reserves the right to conduct contract negotiations with the next responsible bidder, should the agency be unsuccessful in negotiating with the selected bidder.

The proposal of the successful applicant will serve as the basis for the contract, the terms of which will be modified within the context of this RFP. The following will be incorporated into any contracts resulting from this RFP:

- NYS Master Contract Terms and Conditions
- Attachment A-1, (Program Specific Terms and Conditions)
- Attachment A-2 (Federally Funded Grants)
- Attachment B-2, (Performance-based Budget)
- Attachment C (Work Plan)
- Attachment D (Payment and Reporting Schedule)

All plans and working documents prepared by the applicant under the contract to be awarded will become the property of the State of New York. OTDA/BRIA reserves the right to use any and all ideas submitted in the proposals received.

Submission of a proposal will be deemed to be the consent of the applicant to any inquiry made by OTDA/BRIA of third parties with regard to applicant's experience or other matters relevant to the proposal. OTDA/BRIA reserves the right to request and consider additional information from any applicant beyond that presented in the initial proposal. The award of the contract, if any, may be made in reliance on additional information requested. Such information may include budget justification, program information, operation details, personnel information, or other funding source information.

All products, deliverable items, and working papers resulting from this contract will be the sole property of OTDA/BRIA and the applicant is prohibited from releasing these documents to any persons other than the Commissioner of the Office of Temporary and Disability Assistance or his/her designee unless authorized by the Office to do so.

The proposal shall be signed by an official authorized to bind the applicant and shall contain a statement to the effect that the proposal is a firm offer for a 180-day period. The proposal shall also provide the name, title, address, telephone number, and area code of individuals with authority to negotiate and contractually bind the corporation or municipality and who may be contacted during the period of proposal evaluation.

XIV. Minority and Women-Owned Business Enterprise (M/WBE) and Equal Employment Opportunity (EEO) Participation Requirements

CONTRACTOR REQUIREMENTS AND PROCEDURES FOR BUSINESS PARTICIPATION OPPORTUNITIES FOR NEW YORK STATE CERTIFIED MINORITY-AND WOMEN-OWNED BUSINESS ENTERPRISES AND EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITY GROUP MEMBERS AND WOMEN

NEW YORK STATE LAW

Pursuant to New York State Executive Law Article 15-A and 5 NYCRR 140-145 OTDA recognizes its obligation under the law to promote opportunities for maximum feasible participation of certified minority and women owned business enterprises and the employment of minority group members and women in the performance of OTDA contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority and women owned business enterprises in state procurement contracting versus the number of minority and women owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that OTDA establishes goals for maximum feasible participation of New York State Certified minority and women owned business enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, OTDA hereby establishes an overall goal of 0% for MWBE participation, 0% for New York State certified minority-owned business enterprises ("MBE") participation and 0% for New York State certified women-owned business enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs). A contractor ("Contractor") on the subject contract ("Contract") must document its good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and the Contractor agrees that OTDA may withhold payment pending receipt of the required MWBE documentation. The directory of MWBEs can be viewed at: <https://ny.newnycontracts.com>. For guidance on how OTDA will determine a Contractor's "good faith efforts," refer to 5 NYCRR §142.8.

In accordance with 5 NYCRR §142.13, the Contractor acknowledges that if it is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth in the Contract, such finding constitutes a breach of Contract and OTDA may withhold payment from the Contractor as liquidated damages.

Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and (2) all sums actually paid to MWBEs for work performed or materials supplied under the Contract.

By submitting a bid or proposal, a bidder on the Contract ("Bidder") agrees to demonstrate its good faith efforts to achieve its goals for the utilization of MWBEs by submitting evidence thereof through the New York State

Contract System ("NYSCS"), which can be viewed at <https://ny.newnycontracts.com>, provided, however, that a Bidder may arrange to provide such evidence via a non-electronic method by contacting their contract manager. Please note that the NYSCS is a one stop solution for all of your MWBE and Article 15-A contract requirements. For additional information on the use of the NYSCS to meet Bidder's MWBE requirements please see the attached MWBE guidance, "Your MWBE Utilization and Reporting Responsibilities Under Article 15-A."

Additionally, a Bidder will be required to submit the following documents and information as evidence of compliance with the foregoing:

- A. An MWBE Utilization Plan with their bid or proposal. Any modifications or changes to the MWBE Utilization Plan after the Contract award and during the term of the Contract must be reported on a revised MWBE Utilization Plan and submitted to OTDA.

OTDA will review the submitted MWBE Utilization Plan and advise the Bidder of OTDA acceptance or issue a notice of deficiency within 30 days of receipt.

- B. If a notice of deficiency is issued, the Bidder will be required to respond to the notice of deficiency within seven (7) business days of receipt by submitting to the OTDA, [address phone and fax information], a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by OTDA to be inadequate, OTDA shall notify the Bidder and direct the Bidder to submit, within five (5) business days, a request for a partial or total waiver of MWBE participation goals. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.

OTDA may disqualify a Bidder as being non-responsive under the following circumstances:

- a. If a Bidder fails to submit a MWBE Utilization Plan;
- b. If a Bidder fails to submit a written remedy to a notice of deficiency;
- c. If a Bidder fails to submit a request for waiver; or
- d. If OTDA determines that the Bidder has failed to document good faith efforts.

The Contractor will be required to attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the Contract. Requests for a partial or total waiver of established goal requirements made subsequent to Contract Award may be made at any time during the term of the Contract to OTDA, but must be made no later than prior to the submission of a request for final payment on the Contract.

The Contractor will be required to submit a Contractor's Quarterly MWBE Contractor Compliance & Payment Report to the OTDA, by the 10th day following each end of quarter over the term of the Contract documenting the progress made toward achievement of the MWBE goals of the Contract.

Equal Employment Opportunity Requirements

By submission of a bid or proposal in response to this solicitation, the Bidder/Contractor agrees with all of the terms and conditions of Appendix A – Standard Clauses for All New York State Contracts including Clause 12 - Equal Employment Opportunities for Minorities and Women. The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the Contractor, undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer,

layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

The Bidder will be required to submit a Minority and Women Owned Business Enterprises and Equal Employment Opportunity Policy Statement, Form OTDA 4970, to OTDA with their bid or proposal.

For purposes of this solicitation, OTDA hereby establishes an Equal Employment Opportunity participation goal of 20%. To ensure compliance with this Section, the Bidder will be required to submit with the bid or proposal an Equal Employment Opportunity Staffing Plan (Form OTDA 4934 - Staffing Plan) identifying the anticipated work force to be utilized on the Contract and if awarded a Contract, will, on a quarterly basis or upon request, submit an Equal Employment Opportunity Workforce Employment Utilization Compliance Report identifying the workforce actually utilized on the Contract, if known, through the New York State Contract System; provided, however, that a Bidder may arrange to provide such report via a non-electronic method by contacting their contract manager.

Further, pursuant to Article 15 of the Executive Law (the "Human Rights Law"), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

PART B – Instructions for Completing the Application

Please read Pages 1-22 of the Request for Proposals carefully before completing the application. The entire Services to Cuban and Haitian Entrants Application must be submitted in Grants Gateway. Read and follow all instructions while completing the screens in Grants Gateway. A printed version of the application appears in Part D.

Completing the Application

Here are some general guidelines for navigating the Grants Gateway System:

- Log into Grants Gateway as a Grantee, Grantee Signatory or Grantee System Administrator.
- Click the **VIEW OPPORTUNITIES** button.
- From the “search by funding agency” drop-down menu, select Office of Temporary and Disability Assistance. Click **SEARCH**.
- Locate Cuban Haitian Entrant Program and click on the blue link.
- Click the **APPLY FOR GRANT OPPORTUNITY** button.
- From the **Forms Menu**, complete the forms described in these instructions. Screens from the Forms Menu do not have to be completed in any particular order. Certain forms may be left blank if they do not apply to your application, such as the budget items not requested. There will be a “global warning” error if you try to submit an application without completing required forms.
- You must **SAVE YOUR WORK** **SAVE** before moving onto a new screen.
- If you do not complete the application in one session, it will be in your “tasks”

box, **My Tasks**, labeled **Current Status** **Application in Process**. Another way to find an application in process is to click the **Applications** tab at the top of the screen.

Please note: Although those logged in as Grantee may work on the application, only those logged in as a Grantee Signatory or a Grantee System Administrator can submit the application to the State.

When the application is ready for submission, click the **Status Changes** tab, then click the **APPLY STATE** button under “application submitted”.

Other helpful information:

- There is a Grantee Application Tutorial Video available. After logging into Grants Gateway, click the **Training Materials** tab at the top of the screen.
- Helpdesk information: Monday thru Friday 8am to 8pm
 - Phone: 1-800-820-1890 Email: helpdesk@agatesoftware.com

Screens to complete in the Forms Menu in Grants Gateway are as follows:

Find **VIEW OPPORTUNITIES** Enter your search criteria then click **SEARCH**.

Click the link for your opportunity.

From the **Forms Menu**, complete the following Forms/Screens listed below. Sections from the **Forms Menu** do not have to be completed in any particular order. You must save **SAVE** your work before moving onto a new screen. If you do not complete it all in one session, search for the application in progress from the application link at the top of the screen when you return. After each section is completed and saved, return to the **Forms Menu** and click on the next section to be completed.

Project Site Address Screen- Enter all the site addresses, one site per screen, including agency specific regional information. Regional council is n/a.

Click **SAVE**.

Click **ADD** for additional screens.

Program Specific Questions- Follow the instructions at the top of the screen. Answer all questions in this section. Narrative answer spaces are limited to maximum of 4,000 characters text and OTDA expects answers to be concise. Upload forms when required. Upload optional forms when applicable or write n/a in the narrative answer space.

Your responses should address the following:

- Describe your organization's experiences in providing services to Cuban/Haitian Entrants and/or other eligible populations.
- Describe your organization's other programs and services that it operates and how these programs or services will be used to enhance the effectiveness of the proposed program.
- Describe your organization's working relationships with other local agency's including what specific resources clients will gain through these relationships.
- Describe that your organization has an on staff attorney and/or accredited representative with the Board of Immigration Appeals (BIA).
- If your organization is not BIA recognized or accredited describe the plan to become BIA accredited, including the timeframe when this is to take place.
- Describe the eligible target populations in your community(ies)/county and their countries of origins
- Describe the special needs or unique circumstances of the target population.
- Describe why the services of the Cuban and Haitian program is needed and how your organization proposed program will address the special the needs or unique circumstances of the target population
- Describe the physical location(s) of the project.
- Please provide a client flow chart that depicts the proposed program from intake to discharge.
- Describe and identify potential barriers that may affect service delivery and how your agency will address them
- Describe how your agency would obtain and incorporate input from the target population in the development/implementation of the proposed program.
- Describe staff language capacity and how services will be provided in a culturally and linguistically appropriate manner. Also describe how staff will assist members of the target population for whom the agency has no language capacity.
- Describe how staff will receive regular training and updates on the latest immigration issues.
- Describe if your agency requires a start up period to hire personnel, recruit participants, purchase supplies or train personnel. If yes describe the time.
- Submit from your agency a Key Personnel Profile including staff members name and job title, qualifications, responsibilities, language spoken and percent of time to be spent on the proposed project and supervisor.
- If applicable, provide a list of proposed subcontractors including name, contact person, address, phone number and the specific services that subcontractor will provide. Describe in detail your process for monitoring subcontractors if any.
- Describe in sufficient detail the activities, tasks, or strategies employed to achieve each objective. Describe how the documentation requirements will be obtained and maintained. Describe the number of staff persons, each staff person's roles and responsibilities in providing the required and/or allowable services, and how staff will provide the services in a linguistically and culturally appropriate manner.
- Click **SAVE**.

Performance Based Budget Summary Screens-

- Complete the Performance Based Budget Summary screen for grant funds requested for the **first budget period** (September 1, 2016 – February 28, 2017).
- Complete the Performance Budget by clicking the **ADD** in the top right corner of the screen.
- Under "Details" in the textbox next to "Deliverable/Outcome" type the deliverable/outcome (ex. Immigration Assistance) that your agency will provide.

- Under "Financial", using the maximum payment rates on page 11 of the RFP as a guide, complete "Total Amount Per Unit" and "Grant Amount Per Unit".
- The same number should be in both boxes.
- Under "Number of Units" include the **total number** of units of the deliverable/outcome your agency is proposing for the first 6 month budget period.
- Under "Total Grant Funds" put the amount per unit multiplied by the number of units to get the total amount being requested for the deliverable/outcome.
- Click **SAVE**
- Repeat this process for each deliverable/outcome your agency will provide in your proposed Work Plan.
- Only use whole dollar amounts for funds requested.

Work Plan: Grant Opportunity Defined Screens- Section consists of the work plan overview form, deliverables/outcomes, tasks and performance measures.

Work Plan Overview Screen- This section should be completed from a 6 month perspective. Therefore the first Work Plan should be September 1, 2016 – February 28, 2017.

Deliverables/Outcomes and Tasks Screen-

- Each deliverable/outcome will appear on its own screen.
- To start, select the deliverable/outcome you want to work on from the drop down and click **GO** (Example: Immigration Assistance).
- Next to the required and/or allowable task you want to work on, click **View/Add** under Performance Measure (Example: Consultation about an individual's immigration status).
- In the Performance Measure Name field, enter your first task.
- This field allows for very few characters (Example: Consultation on status – immigration).
- In the Narrative field define in sufficient detail (who, what, when, where, how) the method of service delivery providing the required and/or allowable tasks to achieve the deliverable/outcome.
- Click **SAVE**
- Using Immigration Assistance as an example, if you have more than one Immigration Assistance, click **ADD** at the top of the screen and enter a different performance measure (Example: Intervention on behalf of individual immigration status), and complete the Narrative field.
- Click **SAVE**
- There is a 4,000 character limit on the performance measure narrative section.
- Although not required, examples of the Employment Authorization Documentation (I-766) or Adjustment of Status (I-485) forms, etc. may be attached.

For each task, include the number of staff and each staff person's role and responsibilities in providing the required and/or allowable task.

If a subcontractor will provide a required and/or allowable task, indicate such.

IMMIGRATION ASSISTANCE

- Describe the method of service delivery (who, what, when, where, how) for each task that your agency proposes to provide and how each will be delivered (group, workshop or individually).
- Service providers are not required to provide all allowable Immigration Assistance tasks.

ESL/CIVICS/LITERACY

- Describe and define your agency's process for enrolling participants into the courses.
- Describe your agency's process for providing ESL/Civics/Literacy to participants enrolled into the courses.
- Describe your agency's plan for verifying the participant completed the courses.

OUTREACH

- Describe your agency's process for providing participants with information regarding organized events and activities.
- Describe your agency's process for informing, educating, and assisting the participants/target population to access program services.
- Describe your agency's plan for documenting the performance of this task.

ORIENTATION/COMMUNITY EDUCATION

- Describe your agency's process to familiarize clients with documentation requirements, the immigration process, and/or other services available to them.
- Describe your agency's plan for documenting the performance of this task.

Pre-Submission Upload Screen- Download all forms by following the links available on the Upload Screen, or print the forms from Section B of this application. Upload all required forms in the places designated throughout the application. If required information is not available or cannot be produced, an explanation must be uploaded.

- In the **Pre-Submission Uploads** section of the forms menu, there is an Excel document of Attachment B-2 Performance Based Budget Summary form on which the applicant must indicate the funds requested for the 54-months contract term
- This form should correlate with the budget developed on the Performance Budget screens.

PART C – Forms to Upload

Upload all required forms in the places designated throughout the application:

- **General Information** - Complete all applicable sections and upload with the application
- **Agency Organizational Chart** - Upload your agency's organizational chart.
- **Participant Flow Chart** - Upload a participant flow chart depicting your agency's service delivery sequence.
- **Key Personnel Profile** - Upload a chart that depicts the staff involved with the project. For each staff member listed, include the person's name and job title, the responsibilities of the person, the required qualification for the position, the name and title of the supervisor, and the full time equivalent (FTE) of the person's position.
- **Attachment B-2 Performance Based Budget for 6 and 54 Month Contract Term** - Complete and upload the performance budget for the 6 and 54-month contract term based on the unit rates established on the annual budget completed on the Performance Based Budget Summary screens.
- **Agency Agreement Form** - Sign, complete and upload with the application
- **Subcontractor and Supplier Identification Form** - Complete all applicable sections and upload with the application.
- **Equal Employment Opportunity Staffing Plan** - Complete all applicable sections and upload with the application.
- **M/WBE – EEO Policy Statement** - Complete all applicable sections and upload with the application.
- **Most recently Audited Financial Statements** - Upload your agency's most recent Audited Financial Statements.
- **Proof of Workers' Compensation Coverage** - Upload your agency's most recent certificate of workers' compensation insurance.
- **Proof of Disability Benefits Coverage** - Upload your agency's most recent certificate of disability benefits insurance.

The **New York State Vendor Responsibility Questionnaire Not-For-Profit Business Entity** will not be a required upload in Grants Gateway. Instructions on how to complete and file the questionnaire can be found on the VendRep website www.osc.state.ny.us/vendrep.

The **New York State Grants Gateway Vendor's Quick Start Guide** can be downloaded via the Pre-Submission Uploads screen in Grants Gateway or found online at http://grantsreform.ny.gov/sites/default/files/grantee_quick_start_guide.pdf

GENERAL INFORMATION

**SERVICES TO CUBAN/HAITIAN ENTRANTS APPLICANT PROJECT INFORMATION
INDICATE TYPE OF ORGANIZATION CARRYING OUT THE ACTIVITY:**

PUBLIC AGENCY FAITH BASED NON-PROFIT OTHER NON-PROFIT

APPLICANT NAME: _____

EXECUTIVE DIRECTOR: _____

BUSINESS ADDRESS: _____

CITY _____ STATE _____ ZIP CODE _____

PHONE: (____) _____ FAX :(____) _____

Email Address: _____

PROJECT ADDRESS (if other than business address):

PROGRAM CONTACT: _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE: (____) _____ FAX :(____) _____

Email Address:

What is your organization's Federal Employer Identification number? _____

Applicant Fiscal Year: (Example: July 1 - June 30)? _____

Please provide the following identifying information regarding the project:

Community District(s) *NYC only*: _____

Federal Congressional District(s): _____

State Assembly District(s): _____

State Senate District(s): _____

What is your organization's **six digit** State Registered Charitable Organization number? _____

Is your organization current with the NYS Office of the Attorney General Charities registration filing requirements? _____ YES _____ NO

If not, why? _____

COUNTY/ COUNTIES (WHERE SERVICES ARE TO BE PROVIDED) _____

ACCESSIBILITY DETERMINATION

Is project site: wheelchair accessible? Yes No

Does your agency conform with Title III ADA requirements? Yes No

If facilities are not accessible to persons with disabilities, state what physical changes will be made to conform to the Americans with Disabilities Act of 1990 and the regulations promulgated thereunder, and the expected completion date for any such physical changes.

Are materials available in alternative formats for persons with disabilities? (i.e. Braille, Audio Recording etc.)
 Yes No

No further entries on this page.

Attachment B-2 Performance-Based Budget Summaries

ATTACHMENT B-2 - PERFORMANCE BASED BUDGET SUMMARY

PROJECT NAME: NYS Services to Cuban/Haitian Entrants

CONTRACTOR SFS PAYEE NAME:

CONTRACT PERIOD: From: 09/01/2016

To: 02/28/2017

1	Outreach	\$350.00	\$350.00		\$0.00			\$0.00
2	Orientation/Community Education	\$1050.00	\$1050.00		\$0.00			\$0.00
3	Immigration Assistance	\$325.00	\$325.00		\$0.00			\$0.00
4	ESL/Civics/Literacy	\$375.00	\$375.00		\$0.00			\$0.00
5					\$0.00			\$0.00
Subtotal					\$0.00	\$0.00		\$0.00
Available Bonus								
TOTAL					\$0.00	\$0.00		\$0.00

Contract Number: #
 Page 1 of 1, Attachment B-2 - Performance Based Budget

**ATTACHMENT B-2 - PERFORMANCE BASED BUDGET
SUMMARY**

PROJECT NAME: **NYS Services to Cuban/Haitian Emigrants**

CONTRACTOR SFS PAYEE NAME: **[REDACTED]**

CONTRACT PERIOD: From: **09/01/2016**

To: **02/28/2021**

1	Outreach	\$350.00	\$350.00		\$0.00				\$0.00
2	Orientation/Community Education	\$1050.00	\$1050.00		\$0.00				\$0.00
3	Immigration Assistance	\$325.00	\$325.00		\$0.00				\$0.00
4	ESI/Civics/Literacy	\$375.00	\$375.00		\$0.00				\$0.00
5					\$0.00				\$0.00
Subtotal					\$0.00	\$0.00		\$0.00	\$0.00
Available Bonus									
TOTAL					\$0.00	\$0.00		\$0.00	\$0.00

Contract Number: # **[REDACTED]**
Page 1 of 1, Attachment B-2 - Performance Based Budget

AGENCY AGREEMENT

It is understood and agreed to by the applicant that (1) This RFP does not commit the New York State Office of Temporary and Disability Assistance (OTDA) to award any contracts, pay the costs incurred in the preparation of response to this RFP, or to procure or contract services. (2) OTDA reserves the right to amend, modify or withdraw this RFP and to reject any proposals submitted, and may exercise such right at any time and without notice and without liability to any Offeror or other parties for their expenses incurred in the preparation of a proposal or otherwise. Proposals will be prepared at the sole cost and expense of the Offeror. (3) OTDA reserves the right to accept or reject any or all proposals that do not completely conform to the instructions given in the RFP, including time frames for submission thereof. (4) Submission of a proposal will be deemed to be the consent of the applicant to any inquiry made by OTDA of third parties with regard to the applicant's experience or other matters deemed by OTDA relevant to the proposal. (5) Funds granted for this project will be used only for the conduct of the project as approved. (6) The contract may be terminated in whole, or in part, by OTDA. Such termination shall not affect obligations incurred under the contract prior to the effective date of such termination. (7) When funds are advanced any unexpended balance or funds unaccounted for at the end of the approved period must be returned. (8) Any significant revision of the approved project proposal must be requested in writing by the contractor prior to enactment of the change. (9) Progress reports must be submitted as required by OTDA. The final program and financial reports must be submitted within a specified time period after the project terminates. Necessary records and accounts including financial and property controls will be maintained and made available to OTDA for audit purposes. (10) All reports of investigations, studies, and publications made as a result of this proposal must acknowledge the support provided by OTDA. (11) All personal information concerning individuals served or studies conducted under the project are confidential and such information may not be disclosed to unauthorized persons, corporations, or agencies. (12) OTDA reserves a royalty free non-exclusive license to use and to authorize others to use all copyrighted material resulting from this project. (13) Successful applicants will be subject to the State's prompt contracting law. (14) Selected contractors agree to be bound by the Minority and Women-Owned Business Enterprises/Equal Employment Opportunity anti-discrimination provisions as more fully set forth in this RFP.

OTDA reserves the right, if funds become available, to reconsider additional proposals submitted in response to this RFP at that time, using the same scoring criteria and award methodology, in lieu of releasing a new RFP, if deemed to be in the best interest of the State.

OTDA anticipates making an award to administer projects for sixty (54) months. Projects may be renewed for additional periods depending on continued need for the services, achievement of anticipated outcomes, continued availability of funding and at the sole discretion of OTDA. For those applicants selected as a result of this Request for Proposals (RFP), subsequent year's funding may be at a decreased level.

The applicant certifies that to the best of his/her knowledge and belief the information in this application is true and correct, that he/she will comply with the above agreement if the grant is received, and that this constitutes a firm offer for 180 days.

(Signature of official authorized to sign for applicant)

(Date)

(Type name and title)

SUBCONTRACTOR AND SUPPLIER IDENTIFICATION FORM

INSTRUCTIONS: This form must be submitted with any bid, proposal, or proposed negotiated contract. This identification form must contain a detailed description of the supplies and/or services to be provided by each subcontractor or supplier under the contract. Offerors must indicate by checking the box(es) below which business designation(s) each listed Subcontractor/Supplier meets. Attach additional sheets if necessary.

Officer's Name: _____
Address: _____
City, State, Zip Code: _____
Regional Location of Work: _____

Federal Identification Number: _____
Telephone Number: _____
Email: _____
Will New York State businesses be used in the performance of this contract? YES NO

1. Subcontractor/Supplier Business Name, Address, Email Address, Telephone No.	2. Services/Product Provided	3. Federal ID No.	4. Business Designation 4. Check-all that apply	5. Dollar Value of Subcontract/Supplier Services over the term of the contract.
A.			<input type="checkbox"/> MISE <input type="checkbox"/> WIRE <input type="checkbox"/> NYS Business** <input type="checkbox"/> NYS Small Business**	
B.			<input type="checkbox"/> MISE <input type="checkbox"/> WIRE <input type="checkbox"/> NYS Business** <input type="checkbox"/> NYS Small Business**	
C.			<input type="checkbox"/> MISE <input type="checkbox"/> WIRE <input type="checkbox"/> NYS Business** <input type="checkbox"/> NYS Small Business**	
D.			<input type="checkbox"/> MISE <input type="checkbox"/> WIRE <input type="checkbox"/> NYS Business** <input type="checkbox"/> NYS Small Business**	
E.			<input type="checkbox"/> MISE <input type="checkbox"/> WIRE <input type="checkbox"/> NYS Business** <input type="checkbox"/> NYS Small Business**	

PLEASE IDENTIFY ALL subcontracting and supplier purchasing opportunities.
NOTE: Any Subcontractor or Supplier purchase in excess of \$10,000 must comply with NYS Vendor Responsibility Requirements.

New York State businesses have substantial presence in State contracts and strongly encourage the contractors of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, MDCM offers the following requirements for contractors for construction, scientific technology and strongly encourage and expect to consider New York State businesses in the fulfillment of the requirements of the contract. Such purchasing may be as subcontractors, suppliers, products or other supporting roles.

Subcontractors used to be aware that all additional items of subcontract will be strongly encouraged to the maximum extent practical and consistent with their requirements. In order to ensure that all subcontractors and suppliers are aware of the requirements of the contract, MDCM offers the following requirements for contractors for construction, scientific technology and other supporting roles.

Contractors for construction, scientific technology and other supporting roles are encouraged to utilize small, minority and women-owned businesses, consistent with contract statutes.

Offering New York State businesses in State contracts will help create more private sector jobs, robust New York's infrastructure, and contribute economic activity to the overall health of the contractor and its New York State business partners. New York State businesses will promote the contractor's optimal performance under the contract, thereby benefiting the public sector programs that are supported by associated procurements.

Public Procurement can drive and improve the State's economic engine through promotion of the use of New York businesses by its contractors. The State therefore expects MDCM partners to provide maximum assistance to New York businesses in their use of the contract. The potential purchase by at least one New York business will deliver great value to the State and its taxpayers.

NAME AND TITLE OF PREPARER (Print or Type)

Signature: _____
 Authorized Signature
 Date: _____
 Telephone Number: _____
 EMAIL Address: _____

MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISES – EQUAL EMPLOYMENT OPPORTUNITY POLICY STATEMENT

MWBE AND EEO POLICY STATEMENT

I, _____, the (awardee/contractor), _____ agree to adopt the following policies with respect to the project being developed or services rendered at _____

MWBE

This organization will and will cause its contractors and subcontractors to take good faith actions to achieve the MWBE contract participations goals set by the State for that area in which the State-funded project is located, by taking the following steps:

- (1) Actively and affirmatively solicit bids for contracts and subcontracts from qualified State certified MBEs or WBEs, including solicitations to MWBE contractor associations.
- (2) Request a list of State-certified MWBEs from AGENCY and solicit bids from them directly.
- (3) Ensure that plans, specifications, request for proposals and other documents used to secure bids will be made available in sufficient time for review by prospective MWBEs.
- (4) Where feasible, divide the work into smaller portions to enhanced participations by MWBEs and encourage the formation of joint venture and other partnerships among MWBE contractors to enhance their participation.
- (5) Document and maintain records of bid solicitation, including those to MWBEs and the results thereof. Contractor will also maintain records of actions that its subcontractors have taken toward meeting MWBE contract participation goals.
- (6) Ensure that progress payments to MWBEs are made on a timely basis so that undue financial hardship is avoided, and that bonding and other credit requirements are waived or appropriate alternatives developed to encourage MWBE participation.

EEO

- (a) This organization will not discriminate against any employee or applicant for employment because of race, creed, color, national origin, sex, age, disability or marital status, will undertake or continue existing programs of affirmative action to ensure that minority group members are afforded equal employment opportunities without discrimination, and shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on state contracts.
- (b) This organization shall state in all solicitation or advertisements for employees that in the performance of the State contract all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex disability or marital status.
- (c) At the request of the contracting agency, this organization shall request each employment agency, labor union, or authorized representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of this organizations' obligations herein.
- (d) This organization will include the provisions of sections (a) through (c) of this agreement in every subcontract in such a manner that the requirements of the subdivisions will be binding upon each subcontractor, as to work in connection with the State contract



Agreed to this _____ day of _____, 20_____

By _____

Print: _____ Title: _____

Minority Business Enterprise Liaison

_____ is designated as the Minority Business Enterprise Liaison
(Name of Designated Liaison)

responsible for administering the Minority and Women Owned Business Enterprises Equal Employment Opportunity (MWBE-EEO) program.

MWBE Contract Goals

_____ % Minority Business Enterprise Participation

_____ % Women's Business Enterprise Participation

EEO Contract Goals

_____ % Minority Labor Force Participation

_____ % Female Labor Force Participation

(Authorized Representative)

Title: _____

Date: _____

STAFFING PLAN

Submit with Bid or Proposal - Instructions on page 2

Solicitation No.: [REDACTED]	Reporting Entity:	Report includes Contractor's/Subcontractor's: <input type="checkbox"/> Work force to be utilized on this contract <input type="checkbox"/> Total work force
Offeror's Name: [REDACTED]		<input type="checkbox"/> Offeror <input type="checkbox"/> Subcontractor Subcontractor's name _____
Offeror's Address: [REDACTED]		

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

EEO-Job Category	Total Work Force	Work force by Gender		Work force by Race/Ethnic Identification													
		Total Male (M)	Total Female (F)	White		Black		Hispanic		Asian		Native American		Disabled		Veteran	
				(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)	(M)	(F)
Officials/Administrators	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Professionals	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Technicians	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Sales Workers	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Office/Clerical	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Craft Workers	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Laborers	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Service Workers	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Temporary /Apprentices	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Totals																	

PREPARED BY (Signature): [REDACTED]	TELEPHONE NO.: [REDACTED] EMAIL ADDRESS: [REDACTED]	DATE: [REDACTED]
-------------------------------------	--	------------------

NAME AND TITLE OF PREPARER (Print or Type): [REDACTED]	Submit completed with bid or proposal
---	---------------------------------------

General instructions: All Offerors and each subcontractor identified in the bid or proposal must complete an EEO Staffing Plan (OTDA - 4934.1) and submit it as part of the bid or proposal package. Where the work force to be utilized in the performance of the State contract can be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form only for the anticipated work force to be utilized on the State contract. Where the work force to be utilized in the performance of the State contract cannot be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form for the contractor's and/or subcontractor's total work force.

Instructions for completing:

1. Enter the Solicitation number that this report applies to along with the name and address of the Offeror.
2. Check off the appropriate box to indicate if the Offeror completing the report is the contractor or a subcontractor.
3. Check off the appropriate box to indicate work force to be utilized on the contract or the Offerors' total work force.
4. Enter the total work force by EEO job category.
5. Break down the anticipated total work force by gender and enter under the heading 'Work force by Gender'.
6. Break down the anticipated total work force by race/ethnic identification and enter under the heading 'Work force by Race/Ethnic Identification'. Contact the OM/WBE Permissible contact(s) for the solicitation if you have any questions.
7. Enter information on disabled or veterans included in the anticipated work force under the appropriate headings.
8. Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in the designated boxes.

RACE/ETHNIC IDENTIFICATION

Race/ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. For the purposes of this form, 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. However, no person should be counted in more than one race/ethnic group. The race/ethnic categories for this survey are:

- **WHITE** (Not of Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- **BLACK** a person, not of Hispanic origin, who has origins in any of the black racial groups of the original peoples of Africa.
- **HISPANIC** a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- **ASIAN & PACIFIC ISLANDER** a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
- **NATIVE INDIAN (NATIVE AMERICAN/ ALASKAN NATIVE)** a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

OTHER CATEGORIES

- **DISABLED INDIVIDUAL** any person who:
 - has a physical or mental impairment that substantially limits one or more major life activity(eg)
 - has a record of such an impairment; or
 - is regarded as having such an impairment.
- **VIETNAM ERA VETERAN** a veteran who served at any time between and including January 1, 1963 and May 7, 1975.
- **GENDE** Male or Female

(2)

PART D – Printed Version of Grants Gateway Application

No further entries on this page.

Organization	Grant Opportunity	Document #	Document Role	Current Status
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PROJECT/SITE ADDRESSES

Instructions:

1. Please complete all required fields.
2. If Project Statewide is "Yes", do not enter Address information. If Project Statewide is "No", Address information is required.
3. Select the Save button above to save your work frequently.
4. Click Forms Menu to return to the navigation links.

Name/Description:

Project Statewide

Address 1

Address 2

City

County

State

NY

Zip

Regional Council:

Agency Specific Region:

PROGRAM SPECIFIC QUESTIONS

Instructions:

1. Please complete all the required fields.
2. Select the Save button above to save your work frequently.

Project Title

- 1 Describe your organization's experiences in providing services to Cuban/Haitian Entrants and/or other eligible populations and how it will utilize its expertise and capacity to implement services under the proposed program.
- 2 Describe your organization's other programs and services that it operates and how these programs or services will be used to enhance the effectiveness of the proposed program.
- 3 Describe your organization's working relationships with other local agency's including what specific resources clients will gain through these relationships.
- 4 Describe that your organization has an on staff attorney and/or accredited representative with the Board of Immigration Appeals(BIA).
- 5 If your organization is not BIA recognized or accredited describe the plan to become BIA accredited, including the timeframe when this is to take place.
- 6 Describe the eligible Cuban and Haitian target populations in your community.
- 7 Describe the special needs or unique circumstances of the target population.
- 8 Describe why the services of the Cuban and Haitian program is needed and how your organization proposed program will address the special the needs or unique circumstances of the target population

9 Describe the physical location(s) of the project.

10 Please provide a client flow chart that depicts the proposed program from intake to discharge.

11 Describe and identify potential barriers that may affect service delivery and how your agency will address them.

12 Describe how your agency would obtain and incorporate input from the target population in the development/implementation of the proposed program.

13 Describe your agency's language accessibility procedures when assisting members of the target population for whom you have insufficient language capacity.

14 Describe how your staff will receive regular training and updates on the latest immigration issues related to the target population for the proposed program.

15 Describe if your agency requires a start up period to hire personnel, recruit participants, purchase supplies or train personnel. If yes describe the time frame necessary for completing these tasks as well as identify staff that will oversee these activities.

16 Submit from your agency a Key Personnel Profile including staff members name and job title, qualifications, responsibilities, language spoken and percent of time to be spent on the proposed project and supervisor.

Upload

17 If applicable, provide a list of proposed subcontractors including name, contact person, address, phone number and the specific services that subcontractor will provide. Describe in detail your process for monitoring subcontractors if any.

Upload

18 Describe in sufficient detail the activities, tasks, or strategies employed to achieve each objective. Describe how the documentation requirements will be obtained and maintained. Describe the number of staff persons, each staff person's roles and responsibilities in providing the required and/or allowable services, and how staff will provide the services in a linguistically and culturally appropriate manner.

PERFORMANCE BUDGET

Instructions:

1. Please complete all the required fields.
2. Select the Save button above to save your work frequently.
3. Once an deliverable/outcome item has been saved successfully, select the Add button above to add additional deliverable/outcome items.
4. Click Forms Menu to return to the navigation links.

When completing the Performance Based Budget columns Deliverable/Outcome, Total Amount Per Unit and Number of Units must be completed. Total Match Funds should be entered if there is a match/local share component to the program. Line Total and Category Total will populate automatically.

Details
 Deliverable/Outcome
 Financial
 Total Amount Per Unit
 Grant Amount Per Unit
 Number of Units
 Total Grant Funds

Total Match Funds		
Match %		%
Other Funds		
	Line Total	\$0
	Category Total	\$0.00

Page ID
 Click here to see a summary of the detail entered for this category.
[CATEGORY TOTAL SUMMARY](#)

PERFORMANCE SUMMARY

Instructions:

1. If an available bonus is applicable Available Bonus should be completed.
2. Select the Save button above to save your work frequently.
3. Click Forms Menu to return to the navigation links.

The Performance Budget Summary is a summarization of all Performance Budget Detail items. You may view the individual detail items by selecting the Performance Budget Detail Link in the Forms Menu or Navigation Links at the bottom of the page.

	Grant Funds	Match Funds	Match Funds Calculated	Match % Calculated	Match % Required	Other Funds	Total
Subtotal	\$0	\$0	\$0	%	%	\$0	\$0
Available Bonus							\$0
TOTAL	\$0	\$0	\$0	%	%	\$0	\$0
Period Total	\$0.00						

WORK PLAN OVERVIEW FORM

Instructions:

The purpose of this form is to capture organizational information necessary for application processing, as well as a detailed accounting of the proposed or funded project. It is made up of three sections:

1. Project Summary
2. Organizational Capacity
3. Project Details - Objectives, Tasks and Performance Measures

If applicable, specific instructions/requirements for completing these sections may be found in the Grant Opportunity under which you are applying. Click Forms Menu to return to the navigation links.

Work Plan Period From To

Project Summary

Provide a high-level overview of the project, including the overall goal and desired outcomes. Include information such as location, target population, overall number of persons to be served, service delivery method and hours of operation.

Organizational Capacity

Describe the staffing, qualifications and ongoing staff development/training activities, and relevant experience of the provider organization to support the project.

OBJECTIVES AND TASKS

Instructions:

1. Select the View/Add link next to a Task to add or edit the Performance Measures for that Task.
2. Click Forms Menu to return to the navigation links.

Objective
Objective Name
Immigration Assistance
Objective Description
Consultation about an individual's immigration status or any other immigration related issues requiring services or intervention on behalf of the individual regarding their immigration status or any other immigration related issues requiring some type of communication with USCIS.

OBJECTIVES AND TASKS

Instructions:

1. Select the View/Add link next to a Task to add or edit the Performance Measures for that Task.
2. Click Forms Menu to return to the navigation links.

Objective
Objective Name
ESL/Civics/Literacy
Objective Description
Completion of ESL and/or Civics and/or Literacy course by an enrolled client.

OBJECTIVES AND TASKS

Instructions:

1. Select the View/Add link next to a Task to add or edit the Performance Measures for that Task.
2. Click Forms Menu to return to the navigation links.

Objective
Objective Name
Outreach
Objective Description
Organized events/activities to inform, educate, and assist the target population to access program services.

OBJECTIVES AND TASKS

Instructions:

1. Select the View/Add link next to a Task to add or edit the Performance Measures for that Task.
2. Click Forms Menu to return to the navigation links.

Objective
Objective Name
Orientation/Community Education
Objective Description
An organized group event to familiarize clients with documentation requirements, the immigration process, and/or other services available to them.

DEFINE TASKS

Objective: ESL/Civics/Literacy
Task
 ESL Course

DEFINE TASKS

Objective: Immigration Assistance
Task
 Consultation about an individual's immigration status or any other immigration related issues requiring services.

DEFINE TASKS

Objective: Outreach
Task
 Information workshop/seminar

DEFINE TASKS

Objective: Orientation/Community Education
Task
 The completion of one orientation allows the contractor to claim one Orientation/Community Education payment point.

DEFINE TASKS

Objective: Outreach
Task
Mass mailing

DEFINE TASKS

Objective: Immigration Assistance
Task
Intervention on behalf of the Individual regarding their Immigration status or any other immigration related issues requiring some type of communication with USCIS

DEFINE TASKS

Objective: ESL/Civics/Literacy
Task
Civics Course

DEFINE TASKS

Objective: ESL/Civics/Literacy
Task
Combined ESL/Civics Course

DEFINE TASKS

Objective: Outreach
Task
Targeted one-time print media advertisement/article

DEFINE TASKS

Objective: ESL/Civics/Literacy
Task
Literacy Course

PERFORMANCE MEASURE

Instructions:

1. Enter a *Performance Measure* in the field(s) provided below.
2. Select the **Save** button.
3. To add another *Performance Measure*, when applicable, select the **Add** button above.
4. Click **Forms Menu** to return to the navigation links.

Objective:
Task:
Performance Measure Name
Integer

PRE-SUBMISSION UPLOADS

Instructions:

1. Select the **Browse** button to locate an upload.
2. Select the **Save** button above to load it into the system.
3. If the Grant Opportunity you are applying for requires that a specific document be uploaded, a link to the Document Template will appear under the upload row. Click the link to download and save the Document Template to your computer. Once you have filled out the Document Template you can use the associated Upload row to upload the document as part of your application.

General Information *
Complete all applicable sections and upload with the application

Document Template: [Click here](#)

Agency Organizational Chart *
Upload your agency's organizational chart

Client Flow Chart *

Upload a participant flow chart depicting your agency's service delivery sequence.

Key Personnel Profile*

Upload a chart that depicts the staff involved with the project. For each staff member listed, include the person's name and job title, the responsibilities of the person, the required qualification for the position, the name and title of the supervisor, and the full time equivalent (FTE) of the person's position

Attachment B-2 Performance Based Budget for 6 and 54 Month Contract Term *

Complete and upload the performance budget for the 6 and 54-month contract term based on the unit rates established on the annual budget completed on the Performance Based Budget Summary screens.

Document Template: [Click here](#)

Agency Agreement Form*

Sign, complete and upload with the application

Document Template: [Click here](#)

Subcontractor and Supplier Identification Form*

Complete all applicable sections and upload with the application.

Document Template: [Click here](#)

Equal Employment Opportunity Staffing Plan*

Complete all applicable sections and upload with the application.

Document Template: [Click here](#)

MWBE – EEO Policy Statement*

Complete all applicable sections and upload with the application.

Document Template: [Click here](#)

New York State Grants Gateway Vendor's Quick Start Guide

New York State Grants Gateway Vendor's Quick Start Guide for your reference

Document Template: [Click here](#)

Most recently Audited Financial Statements*

Upload your agency's most recent Audited Financial Statements.

Proof of Workers' Compensation Coverage*

Upload your agency's most recent certificate of workers' compensation insurance.

Proof of Disability Benefits Coverage*

Upload your agency's most recent certificate of disability benefits insurance.