**Request for Qualifications for the**

**Re-Entry Workforce Development Demonstration Program**

**FY’19 Appropriation:**

**Program Design Capacity Building Grants**

**Issued by:**

**Commonwealth Corporation**

**RESPONSES DUE:** March 14, 2019 by 11:59 PM

Upload electronic submission to the following link: <https://commcorp.tfaforms.net/328759>

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**Re-Entry Workforce Development Demonstration Program**

**FY’19 Appropriation: Program Design Capacity Building Grants**

**REQUEST FOR QUALIFICATIONS**

**Section One: Grant Program Goals & Funding Availability**

1. ***About the Grant Program:*** The Re-Entry Workforce Development Demonstration Program is an initiative of Executive Office of Labor and Workforce Development Secretary Rosalin Acosta in support of Governor Baker’s effort to improve workforce outcomes among individuals returning to their communities after incarceration (i.e. returning citizens). This state-funded initiative is administered by Commonwealth Corporation on behalf of the Executive Office of Labor and Workforce Development. This grant program is funded through a General Appropriation Act in the Fiscal Year 2019 State Budget (7003-0150).

Commonwealth Corporation seeks qualified partnerships that, upon successful grant award, will work with Commonwealth Corporation for a duration of approximately three months to design or re-design an occupationally-specific training and placement program that will develop more robust state-wide capacity to support returning citizens in obtaining and retaining unsubsidized employment. A grant award through this grant program does not provide a commitment or resources to fund the delivery of training and placement services; however, we anticipate that each partnership who successfully completes all program design activities will be better positioned to compete for future available resources from a variety of sources.

Successful applicants will participate in a Program Design Phase that consists of the following components:

* Technical assistance on designing a cohort-based, occupationally-specific programs designed and managed by regional industry sector partnerships, which includes population-specific approaches designed to meet the needs of returning citizens, including occupational and work readiness skills training, comprehensive support services and coaching, and robust job development and placement support, including post-placement support
* A learning community of grantees and key stakeholders to support grantees, share effective practices, and interface with related state-level initiatives
* Professional development to program staff on related issues

1. ***Program Structure and Design Expectations:*** This program is structured such that following RFQ submission, grantees would participate in three months of facilitated program design activities.

Partnerships will have approximately three months to complete program design activities. Commonwealth Corporation will be engaged with partnerships throughout the Program Design Phase. Partnership members must commit to participating in a program design and technical assistance structure. Partnerships should plan for one in-person meeting per month in April, May, and June and one conference call in between each in-person convening. Each month’s convening will focus on a specific program design topic relevant to all funded partnerships and individual meetings and/or calls will prioritize key challenges or areas identified by each partnership.

At the start of the Program Design Phase, Commonwealth Corporation will provide a template to be completed for each deliverable stage of the program design. The deliverables will be due regularly based on an agreed upon schedule. The following draft schedule, subject to further revision, identifies the program elements that each partnership will be expected to design and deliver:

|  |  |
| --- | --- |
| Date / Session | Illustrative Overview of Topics |
| Month #1  Individual Grantee Meeting/Call #1 | ***Start-Up and Partnership Staffing and Priorities***   * Follow up from initial award announcement call * Contract & Deliverables Review * Partnership Start-Up |
| Month #1  Learning Community Meeting #1 | ***Program Design Structure and Partnership Engagement***   * Introductions to CommCorp Staff, Grantees, and state agency partners * Guest presentation on best practices in program design * Refinement of employer needs, including:   + Required skills for the target occupation   + Required credentials for the target occupation * Employer Engagement and Job Placement Strategy * Understanding how your target population intersects with your target occupation and confirming barrier reduction (e.g. addressing CORIs) * Securing additional partners and/or deepening partnerships with community organizations and local HOC/DOC partners |
| Month #2  Individual Grantee Meeting/Call #2 | ***Partnership Engagement in Program Design and Supports***   * Problem-solve around identified roadblocks * Understanding the workforce problem you are trying to solve * Understanding your target population through individualized and comprehensive assessment of education and work history, strengths, and barriers to employment * Discuss preliminary plans for training design * Exploring engagement with HOC/DOC regarding “behind the wall” components such as creating a proposed client/cohort flow through services provided within the HOC/DOC (e.g. inmate movement, schedules, availability of textbooks, transportation, etc.) |
| Month #2  Learning Community Meeting #2 | ***Building a Comprehensive Program Design with Individualized Supports***   * Training Design, including:   + Technical skills training   + Work readiness training   + Basic education, including ABE, GED, ESOL, math, computers/technology contextualized to the industry and occupation(s)   + Work experience, including paid or unpaid experiences   + Assessment of skill gain * Coordinated Case Management and Mentoring, including:   + Transitional and career coaching   + Post-placement support * Family-focused Supports and Services, including:   + Mental health services   + Sharing approaches to financial literacy skill-building and individualized financial coaching models |
| Month #3  Individual Grantee Meeting/Call #3 | ***Solidifying Your Final Report***   * Review draft Recruitment, Assessment and Selection Tool * Review draft Case Management, Coaching and Participant Support Tool * Discuss approach to job placement * Discuss staffing plan and partnership roles and responsibilities * Problem solve around identified roadblocks and priorities |
| Month #3  Learning Community Meeting #3 | ***Refining Recruitment, Assessment, Selection & Your Final Report***   * Analyze case studies on sourcing & selection strategies * Revisit job placement and retention * Presentation on prioritized topic * Discussion on opportunities and outstanding barriers for implementation |
| TBD  Final Deliverables Submitted | Your Final Report, consisting of program element responses and narrative, is due to your program manager by the end of the Program Design Phase. Please note that these dates are subject to change based on grant award announcement and contracting timelines. |

*NOTE:* Governor Baker established the Workforce Skills Cabinet (WSC) through an Executive Order to create a convening body to align programs and policies across the Executive Office of Labor and Workforce Development, the Executive Office of Education, and the Executive Office of Housing and Economic Development to support a comprehensive economic growth agenda and workforce strategy to meet employer needs. The WSC has established a common agenda for making public investments that includes supporting initiatives that address the following priorities: demand-driven, leverage partnerships, reflect regional plans, maximize increases in skilled workers, support chronically under and unemployed, leverage other state and federal funding, build on proven programs and sustainability. Through the Program Design Phase, Commonwealth Corporation and the partnerships will design programs that address these priorities.

1. ***Target Population:*** This RFQ is seeking qualifications of partnerships that have experience working with returning citizens. Applicants should be as specific as possible when describing their target population and their history and competence in working with them.

Applicants funded under this grant must propose to design programs serving individuals who come from the following populations:

* Individuals in a Department of Correction facility who will be released within one month of a program start date, or individuals who were released within 6 months before enrolling in a program, or a combination of both.
* Individuals in a House of Correction facility who will be released within one month of a program start date, or individuals who were released within 6 months before enrolling in a program, or a combination of both.

1. ***Target Occupation:*** Successful applicants will aim to design a program consisting of cohort-based training, placement, and support services that prepare individuals to meet business’ skill and work-readiness requirements for an in-demand occupation, and better equip them to manage the challenges associated with returning to the community. An applicant may either propose to train individuals for an occupation in a single industry sector or for an occupation that exists in multiple industry sectors. In either case, the applicant will be required to identify the specific occupation to be targeted and commit to designing or enhancing a training program that prepares individuals for the specific occupation.

We recognize that there are occupations with identical required skills and credentials for entry. Applicants may propose to train individuals for multiple target occupations if the required occupational skills and credentials are the same and can be attained through participation in the same training program.

Applications in response to this RFQ must identify a target region and include information about unmet demand for workers for the proposed target occupation. This information must come from regional employers and must include current and projected vacancies and any projected increase in demand for the proposed targeted occupation and skills, as well as credentials required for entry, to demonstrate that the occupation is of critical importance to employers in the region and that there is a need for a training and placement program. Applicants must consult with their local workforce board to gain information regarding the specific occupational priorities that have been developed through the Regional Workforce Skills Planning Initiative regional blueprint process.[[1]](#footnote-1)

There is a growing body of research[[2]](#footnote-2) demonstrating that job seekers benefit from starting at a higher wage and by participating in programs that provide information and coaching on career continuums beyond the first entry-level job. While we have not set a wage floor for proposed occupations, applicants will be required to provide evidence that the programs will place participants in jobs in which the combination of wages, employer-supported benefits and upward mobility pathways are likely to support economic stability. Such evidence might include:

* the proposed target occupation has attainable opportunity for career advancement and wage progression within a reasonable time frame
* the employer partners invest in supporting entry-level employees’ career advancement
* the employer partners provide sufficient benefits
* the proposed target occupation does not have restrictions that would prevent placement and progression for the proposed target population (e.g. no CORI exclusions)

1. ***Funding Availability and Structure:*** Commonwealth Corporation intends to award approximately $85,000 for this grant program, with a maximum award amount of ~$17,000 each to up five partnerships to engage in program design activities.
2. ***Allowable Costs:*** Program design funds may be used for reasonable costs associated with the design of a training and placement program for the proposed target population. These costs may include but are not limited to the following (*Additional guidance is provided in Section Five)*:

* Staff time to engage in program design and partnership coordination
* Anticipated travel expenses
* Rent and associated operating costs not charged to the grant
* Stipends to partners for participation in program design phase activities
* Other expenses related to designing a cohort-based training and placement program

1. ***Payment:*** Funds will be disbursed on a cost reimbursement basis. We anticipate that lead applicants for each partnership will submit approximately three monthly invoices over the duration of the Program Design Phase using the required invoice template supplied by Commonwealth Corporation. Partnerships will only be reimbursed for expenses incurred during the period of the contract. Lead applicants for each partnership will be required to maintain and submit, upon request, back-up documentation for expenses.

**Section Two: Eligible Lead Applicants & Partners**

1. ***Required Partnership Qualifications:*** Partnerships must ensure they have all the partners needed to reach and support their target population in securing employment for their target occupation. Each partner must commit to engaging fully in program planning and development in order to design or re-design components of a training and placement program. Each partner must demonstrate their commitment to the program design process for this initiative. Each partner must also outline their role and anticipated activities. Each partner’s commitments, roles and activities must be provided either through a signed Memorandum of Agreement (MOA) among partners or through the submission of separate letters of commitment.
2. ***Eligible Lead Applicants:***The following organizations are eligible to apply as lead applicants on behalf of a partnership:
   * Community-based organizations
   * Non-profit education, training or other service providers
   * MassHire Workforce Board
   * MassHire Career Center
   * House of Corrections/Department of Correction facility
3. ***Lead Applicant Qualifications****:* Lead applicants must:

* Serve as the convener of partnering organizations necessary to achieve the overall project goals, including, but not limited to, coordinating the design of the project, developing an appropriate budget, negotiating agreement of the project performance management measures, and coordinating all activities of the project.
* Have experience with grant management and operational capacity to manage public funds.
* Be committed to working collaboratively with Commonwealth Corporation to ensure that the program is designed to meet participants’ needs and open to building new relationships.
* Have interest and capacity to engage in open communication with stakeholders about successes and challenges related to the Re-entry Workforce Development Demonstration program.

1. ***Required Partnership Members:***Partnerships must include their regional MassHire Workforce Board and/or MassHire Career Center as well as the House of Correction or Department of Correction facility in their region. We anticipate that selected partnerships will need to work closely with the House of Correction or Department of Correction facility in the region in order to develop successful programs, and we will work with them to deepen their partnership with their regional facility as well as other applicable public and private agencies.

Additionally, a minimum of two businesses with operations in Massachusetts and that employ Massachusetts residents in the proposed target occupation. Business partners must demonstrate the following through the MOA or letter of commitment:

* + Demonstrated Demand: Vacancies and/or hiring needs for workers in the proposed target occupation and a commitment to a candidate-sourcing strategy that includes recruiting and training members of the proposed target population as a solution to meet this demand;
  + Expertise with Technical, Soft Skill and Work Readiness Requirements: Ability to articulate the technical, soft skills, and work readiness requirements for entry-level employment in the proposed target occupation as well as a commitment to provide time to work with partners to design a program that will prepare members of the proposed target population for successful employment in the proposed target occupation.

Please note that if workers in the proposed target occupation at participating businesses are covered by a collective bargaining agreement, the union that represents the workers must also demonstrate partnership through either a signed Memorandum of Agreement or Letter of Commitment.

1. ***Required Roles:***We seek partnerships that, among the members, demonstrate the expertise and/or resources to be successful. Partnerships must identify and include organizations (*required and additional*) who can fulfil the following roles:

**Participant Recruitment and Support Services**

* Cultural Responsiveness: Experience working with and providing culturally responsive services to the proposed target population (i.e. returning citizens);
* Strategies for Outreach to the Target Population: Successful outreach and engagement strategies and robust recruitment of the proposed target population (i.e. returning citizens);
* Referral Capacity: Ability to refer members of the proposed target population (i.e. returning citizens) to the program by leveraging relationships with individuals and other partners;
* Comprehensive Case Management and/or Transitional Coaching: Experience in delivering and/or providing access to comprehensive case management and transitional coaching services to returning citizens.

**Work Readiness, Occupational Training, and Job Placement**

* Expertise in Workforce Training: Qualifications and experience in developing and implementing workforce training for the proposed target occupation;
* Expertise in Competency-Based Work Experience: Expertise in structuring competency-based work experience and strong relationships with employers;
* Job Development, Placement, and Retention Services:
  + Knowledge regarding regional job market, and employer recruitment and screening processes for the proposed target occupation; and
  + Expertise in job development and placement services, including post-placement supports to promote retained employment.

Examples of such partners include, but are not limited to, local service offices of public agencies, one-stop career centers, workforce development boards, employer associations, labor organizations, institutions of higher education and vocational technical education institutions, housing agencies, and non-profit education, training or other service providers.

**Section Three: Submission Schedule & Instructions for Submission**

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| --- | --- |
| Request for Qualifications Released | Wednesday, February 13, 2019 |
| Deadline to Submit Written Questions | Wednesday, March 6, 2019 |
| All Answers to Written Questions Posted on Website | Friday, March 8, 2019 |
| Applications Due | Thursday, March 14, 2019 |
| Applicants Notified of Status (Anticipated) | Late March / Early April 2019 |
| Program Design Contract Start Date  (Subject to Shift Based on Timing of Award) | April 1, 2019 |
| Program Design Phase Period | April 1, 2019 – June 30, 2019 |

* 1. ***Clarification Period:*** Questions about the Re-entry Program Design Request for Qualifications will be accepted in writing through Wednesday, March 6, 2019 at 5pm. Please submit all questions via email to Zac Rich at zrich@commcorp.org. All questions will be responded to and posted on Commonwealth Corporation’s website at [www.commcorp.org](http://www.commcorp.org) by Friday, March 8, 2019. Applicants can sign up at the following link to receive email notifications when new responses are posted: <https://commcorp.tfaforms.net/328758>. However, all potential applicants are advised to check the Commonwealth Corporation’s website periodically for additional information and updates until submissions are due.
  2. ***Qualifications Submission Instructions:*** Applications are due on Thursday, March 14, 2019 by 11:59 PM. Please upload your submission electronically to the following link:

<https://commcorp.tfaforms.net/328759>. In order to upload your submission, you will need to complete a form that provides the following information: (1) the **Name** of the lead applicant organization, (2) the lead applicant organization’s **Federal Employer ID Number**, (3) the lead applicant organization’s **Department of Unemployment Assistance ID Number**, (4) the **Total Program Design Funds Requested**, and (5) the lead applicant organization’s **Primary Contact Person** (to be notified upon decision of grant award).

Applicants should review all components prior to uploading in order to ensure they have completed all of the required information. Narrative forms must be submitted in MS Word file format. Budgets must be submitted in MS Excel file format. Signed MOAs or letters of commitment must be scanned and submitted in the form of a single PDF file. COGS must be submitted in the form of a PDF file. Should you encounter any submission issues, please contact Zac Rich at [zrich@commcorp.org](mailto:zrich@commcorp.org) or 617-717-6941.

* 1. ***Qualifications Submission Package Components:*** The following documents make up the required components of the Qualifications Submission Package. Failure to provide any of the documents or materials listed below may result in the disqualification of the application.
  2. ***Project Profile:*** Attachment 1 is the Project Profile. Complete each question on the Project Profile. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions. There is no page limit for Attachment 1, but we ask that you limit responses only to what is necessary to answer each question sufficiently.
  3. ***Program Design Narrative Form****:* Respond to all questions on the Program Design Narrative Form. Attachment 2 has a five-page limit including charts. We ask that you limit responses only to what is necessary to answer each question sufficiently. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions.
  4. ***Partnership Qualifications Chart****:* The Partnership Qualifications Chart asks you to describe *which partner* has the relevant experience or expertise for each required qualification that is listed. *Please refer back to Section 2 for a more detailed list of qualifications.* You should include specific examples of their experience or expertise in the designated area. It is likely that their qualifications will align with their specific role during the Program Design Phase. While it is likely that multiple partners may have the required qualifications, we ask that you list at least one but no more than two (2) organizations for each category, and keep in mind that all partnerships are required to include at least two Massachusetts-based businesses. Do not delete any of the questions. Attachment 3 has no page limit and you may adjust the spacing in this section to accommodate your answers; however, we ask that you limit responses only to what is necessary to answer each question sufficiently.
  5. ***Memorandum of Agreement or Letter of Commitment****:* Each partner must demonstrate their commitment to participate in the Program Design Phase. Each partner must also outline their role and anticipated activities. Each partner’s commitments, roles and activities must be provided either through a signed Memorandum of Agreement (MOA) among partners or through the submission of separate letters of commitment. This component pertains to all partners in addition to the required employer partners. *See Section 2 for more information about required partner commitments.*
  6. ***Program Design Phase Budget and Budget Narrative Forms*:** Attachments 5a and 5b are the Program Design Phase Budget and Budget Request Narrative Forms. These are included as a separate MS Excel Workbook labeled “Re-Entry FY’19 Program Design Budget Forms.” You must submit a detailed budget request using the provided forms. The budget will also become the financial basis for any grant award and for making cost reimbursement payments over the course of the three month Program Design Phase. Commonwealth Corporation reserves the right to modify application budgets prior to and/or after grant award. **Applicants are required to submit the provided excel document, which consists of ONLY templates for a Program Design Budget of up to $17,000.**
  7. ***Certificate of Good Standing****:* All **lead applicants**\* must submit a Certificate of Good Standing from the Massachusetts Department of Revenue. This should be included in your Qualifications Submission Package and labeled Attachment 6.**\*Please note that community colleges, public vocational technical high schools, and public state universities serving as the lead applicant do not need to submit a Certificate of Good Standing.**

**Section Four: Submission Evaluation Process & Criteria**

1. ***Proposal Evaluation Process****:* Qualifications submitted in response to this solicitation will be reviewed by Commonwealth Corporation and the Executive Office of Labor and Workforce Development, with the participation of other state partners.

The review process will consist of the following steps:

**Step 1: Threshold Criteria Screening**

Submissions will be screened for completeness, conformity to the program requirements, and timeliness of response. Submissions that are incomplete, non-conforming, or late may not be considered.

**Step 2:** **Compliance Screening**

Commonwealth Corporation will conduct an analysis to ensure all lead applicants are in compliance with state and federal law. Lead applicants are encouraged to review these criteria and ensure they are in compliance prior to submitting an application. Commonwealth Corporation will conduct the following reviews to ensure compliance:

* Ensure applicants are in good standing with the Massachusetts Department of Revenue. Commonwealth Corporation will conduct this screening by reviewing the Certificate of Good Standing (C.O.G.S.) submitted in the Qualifications Submission Package. **Please note that community colleges, public vocational technical high schools and public state universities serving as the lead applicant do not need to submit a Certificate of Good Standing.**
* Please follow this guidance when requesting and submitting a Certificate of Good Standing from the Department of Revenue:
  + The **Certificate of Good Standing from the Department of Revenue** is **NOT** the same and should not be confused with a **Certificate of Incorporation from the Secretary of State**
  + C.O.G.S. must be less than six months old
  + Please visit the Department of Revenue’s website:

(<http://www.mass.gov/dor/businesses/programs-and-services/certificate-of-good-standing.html>) for more information about the C.O.G.S. and to complete an online application to obtain a Certificate

* + Applications for a C.O.G.S. can take 4-6 weeks to be processed
* Ensure applicant is in full compliance with all obligations to the Department of Unemployment Assistance, Department of Industrial Accidents, and any other obligations to the Commonwealth of Massachusetts. Commonwealth Corporation will work with the Department of Unemployment Assistance to conduct this review.

**Step 3: Review Committee**

A review committee will review and score all eligible submissions. Review results will be documented. EOLWD and Commonwealth Corporation reserves the right to request additional information from any applicant to ensure that the review committee has a complete understanding of the program concept.

Submissions willbe reviewed and scored based on the following criteria:

|  |  |
| --- | --- |
| **Category** | **Point value** |
| Engagement of businesses with demonstrated demand and commitment to designing a program that will serve as a source of qualified candidates to fill open positions in the proposed target occupation | **25** |
| Demonstrated expertise in cultural responsiveness, comprehensive support services, and experience reaching and engaging with returning citizens in accordance with the outlined criteria | **25** |
| Qualifications, expertise, and experience in developing and implementing workforce training and placement based on the technical, work-readiness, and soft skills required for entry-level employment in the proposed target occupation | **20** |
| Track record of success and qualifications/capacity of lead applicant with grant management and fiscal coordination | **15** |
| Need for project is clearly and consistently demonstrated in the narrative and budget and the lead applicant articulates how engaging in the three month Program Design Phase will contribute to building greater capacity for future program implementation | **15** |

**Step 4: Notification of Grant Award Status**

All applicants will be notified of their award status by email.

1. ***Additional Terms and Evaluation Notes:*** In addition to the scoring system outlined above,Commonwealth Corporation reserves the right to consider only submissions that, in our sole judgment, are complete and responsive to the solicitation’s requirements and include all required application components. Additionally, Commonwealth Corporation and the Executive Office of Labor and Workforce Development reserve the right to consider other criteria in making competitive awards among comparably qualified applicants. This includes the right to consider applications that propose to serve specific populations that may meet criteria related to additional funding identified for this initiative following the posting of the RFQ. Commonwealth Corporation reserves the right to reject any and all applications, or to accept any and all applications, in whole or in part, if deemed to be in the interest of the Commonwealth Corporation or the Commonwealth of Massachusetts to do so. This RFQ does not commit Commonwealth Corporation to award any contracts. Upon submission, all applications become the property of Commonwealth Corporation. Commonwealth Corporation is not responsible for electronic submissions that are not received by Commonwealth Corporation. We reserve the right to use sources of funding other than the Re-entry line item to support proposals submitted in response to this solicitation. If applicants propose to use other funding sources to support the proposed program design, Commonwealth Corporation reserves the right to consult with the other funders to ensure appropriate alignment of resources.
2. ***Appeals:*** Appeals of the funding decision may be filed with J.D. LaRock, President, Commonwealth Corporation, 2 Oliver Street, 5th Floor, Boston, MA 02109. Appeals must be filed within fifteen (15) days of the date of Commonwealth Corporation’s notice to unsuccessful bidders. The President may decide to hold an informal review of the decision, and may decide to grant an appeal, deny an appeal, or modify an award based on information provided during the informal review.
3. ***Audited Financial Statements and Verification of Fiscal Management Capacity****:* All applicants that are selected for an award will be required to submit a copy of the organization’s most recent audited financial statement prior to the execution of a final contract.In addition, prior to the grant award, Commonwealth Corporation staff may review an organization’s fiscal systems and internal controls to verify that the organization has the capacity to manage public grant funds and administer the program.
4. ***Project Terms and Conditions*:** Grantees will be required to abide by Commonwealth Corporation’s Standard Contract Terms and Conditions, which will be provided during contract negotiation. Applicants may review these terms and conditions prior to submitting an application by contacting Zac Rich at [zrich@commcorp.org](mailto:zrich@commcorp.org) to request a copy. In addition, all final contracts are subject to negotiation of a final statement of work.

Section Five: Summary of Attachments

The following attachments must be submitted by all applicants:

* Attachment 1: Project Profile
* Attachment 2: Program Design Narrative Form
* Attachment 3: Partnership Qualifications Chart
* Attachment 4: Memorandum of Agreement or Letter of Commitment
* Attachment 5a and 5b: Program Design Phase Budget and Budget Narrative Forms
* Attachment 6: Certificate of Good Standing

Attachment 1: Project Profile

Please complete each question on the Project Profile. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions. There is no page limit for Attachment 1, but we ask that you limit responses only to what is necessary to answer each question sufficiently.

*Please note: This symbol* **^** *identifies information which you will also need to enter on the online submission form (see Section 3B Qualifications Submission Instructions).*

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| **PROJECT PROFILE** | | | | | | | | |
| **Name of Lead Applicant Organization ^** | |  | | | | | | |
| **Applicant Type:** Please select (⌧) the type of organization that represents the lead organization. | | | | | | | | |
| ❑ Nonprofit Education, Training, or Other Service Provider  ❑ MassHire Workforce Board  ❑ Community-Based Organization | | | | ❑ MassHire Career Center  ❑ House of Corrections or Department of Corrections | | | | |
| **Department of Unemployment Assistance ID Number ^** | |  | | | **Federal Employer ID Number (FEIN) ^** | | |  |
| **Total Program Design Funds Requested (up to maximum of ~$17,000) ^** | |  | | | | | | |
| **LEAD APPLICANT CONTACT INFORMATION** | | | | | | | | |
| **Role** | **Name / Title** | | **Address** | | | **Phone** | **Email** | |
| **Primary Contact Person ^** (notified upon decision of grant award) |  | |  | | |  |  | |
| **Authorized Signatory^** (authorized to commit organization) |  | |  | | |  |  | |
| **Fiscal Contact**  (fiscally responsible for project funds and submitting invoices) |  | |  | | |  |  | |
| **Project Manager,** if known (contact over the course of the project) |  | |  | | |  |  | |

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| **PARTNERSHIP MEMBERS AND CONTACT INFORMATION**  Please list the organizations and contact information for all required\* and additional partners.  *All partners listed below must have submitted an MOA or Letter of Commitment.* | | | | |
| **Organization Type** | **Organization Name** | **Address** | **Contact Name / Title** | **Phone / Email** |
| **Employer Partner 1\*** |  |  |  |  |
| **Employer Partner 2\*** |  |  |  |  |
| **House of Correction / Department of Correction \*** |  |  |  |  |
| **MassHire Workforce Board / MassHire Career Center \*** |  |  |  |  |
|  |  |  |  |  |
| **Example: Community Based Organization** |  |  |  |  |
| **Example: Probation/Parole** |  |  |  |  |
| **Example: Local Office of Public Agency** |  |  |  |  |
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Attachment 2: Program Design Narrative Form

Respond to all questions on the Program Design Narrative Form. Attachment 2 has a five-page limit including tables, charts, figures, and appendixes. We ask that you limit responses only to what is necessary to answer each question sufficiently. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions.

1. ***Past Performance:*** We are interested in funding organizations that have a track record of success and qualifications/capacity with grant management and fiscal coordination of workforce development programs. Please tell us about a recent grant for the same or similar program that the lead applicant was responsible for managing. Within your response, which may include a table or other visual representation, please provide the following:

* name of the funding agency/organization and the source of funds,
* amount of funds,
* period of performance,
* number of participants,
* how you measured the success of your program, and
* specific performance data.

2.***Need for Project:*** Within this section, please describe the need for your proposed program within your region by addressing the following points. Since we are seeking to build new capacity, you are not expected to be currently operating a similar program. We are interested in learning about your priorities and desire to develop new capacity:

1. What is the geographic area you are proposing to serve?
2. What labor market problem are you seeking to solve?
3. What is currently working well in your program that you can build upon?
4. What is currently not working in your program and how do you propose to address it by engaging with us during the three-month Program Design Phase? Please describe your priorities.
5. ***\*\*\*Applicants must engage in a discussion with their local MassHire Workforce Board about their possible role and are required to provide information about the outcome of the discussion.[[3]](#footnote-3)***Please provide a summary of your discussion(s) with them about their potential involvement in this program and how your proposed program aligns with the priorities identified through the Regional Workforce Skills Planning Initiative regional blueprint process.

3.***Target Population:*** Within this section, please describe the specific population of returning citizens that you plan to serve in accordance with the criteria outlined in Section 1C by responding to the following points:

1. Describe the specific target population you plan to serve (this can be a more specific sub-set of the target population criteria outlined in Section 1C).
2. Provide an explanation of why your chosen population is an appropriate fit with the proposed target occupation(s) described in Attachment 2, Section 4.
3. Describe the track record and experience of partnership member organizations in recruiting and working with the target population.
4. ***\*\*\*Applicants must engage in a discussion with their local House of Correction or Department of Correction facility about their possible role and are required to provide information about the outcome of the discussion.*** Please provide a summary of your discussion(s) with them about their potential involvement in this program and how your proposed program aligns with their strategic priorities. Successful applicants will demonstrate that they have capacity and desire to develop relationships with key personnel at their relevant HOC/DOC facility. We intend to facilitate the process of building upon these commitments to design a continuum of services for clients transitioning out of the facilities.

4. ***Target Occupation*:** Within this section, please describe the specific occupation that you plan to target in accordance with the criteria outlined in Section 1D and explain the regional demand for the proposed target occupation by addressing the following points:

1. Which occupation will your program prepare participants for?
2. How did your partnership determine that there are and will be a sufficient number of vacancies in this occupation within your region and that employers are committed to employing returning citizens?
3. Based on your conversations with employers and other evidence, how would you describe the opportunities for advancement within this occupational track?
4. Using the table below, provide evidence that there are currently sufficient job vacancies in the target occupation among partner employers:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Regional Employer Demand Chart**  \**You must include at least your two employer partners below.*  *You may add rows to the table for additional employers as needed.* | | | | | |
| **Employer** | **Target Occupation Title** | **Number of Current Vacancies in Occupation** | **Skills Required for Entry** | **Credentials Required for Entry** | **Average Hourly Wage**  **At Entry** |
| **Name of Employer Partner 1\*:** |  |  |  |  |  |
| **Name of Employer Partner 2\*:** |  |  |  |  |  |
| **Name of Employer Partner 3:** |  |  |  |  |  |

Attachment 3: Partnership Qualifications Chart

In the following Partnership Qualifications Chart, describe *which partner* has the relevant experience or expertise for each required qualification listed below. **Please include specific examples of their experience or expertise in the designated area and cite specific performance data**, where available (e.g. job placement outcomes, number of participants, etc.). It is likely that their qualifications will align with their specific role during the Program Design Phase. While it is likely that multiple partners may have the required qualifications, **please list at least one but no more than two (2) organizations for each category**, and keep in mind that all partnerships are required to include at least two Massachusetts-based businesses. Partner organizations may be repeated. Do not delete any of the questions. Attachment 3 has no page limit and you may adjust the spacing in this section to accommodate your answers; however, we ask that you limit responses only to what is necessary to answer each question sufficiently. *Please refer back to Section 2 for a more detailed list of qualifications.*

| **Required Role Qualifications and Program Partners Chart** | | | |
| --- | --- | --- | --- |
| **Qualification** | **Organization Name** | **Partnership Member Contact Name and Title** | **What Relevant Experience or Expertise Does This**  **Partner Contribute to the Partnership?**  *Please cite specific performance data where available* |
| ***Example:***  **Strategies for Outreach to the Target Population (Returning Citizens)** | *XYZ Organization* | *Jane Doe, Program Director* | * *Managed recruitment for Job Ready Program from 2012-2018. This program focused on recipients of TANF/TAFDC* * *Recruitment efforts resulted in 50 interested candidates and 10 enrolled participants for each cycle of training* |
|  |  |  |  |
| **Cultural Responsiveness** | 1. |  |  |
| 2. |  |  |
| **Strategies for Outreach to the Target Population (Returning Citizens)** | 1. |  |  |
| 2. |  |  |
| **Referral Capacity** | 1. |  |  |
| 2. |  |  |
| **Comprehensive Case Management and Transitional Coaching Services to Returning Citizens** | 1. |  |  |
| 2. |  |  |
| **Expertise with Technical, Soft Skill and Work Readiness Requirements** | 1. |  |  |
| 2. |  |  |
| **Expertise in Workforce Training** | 1. |  |  |
| 2. |  |  |
| **Expertise in Competency-Based**  **Work Experience** | 1. |  |  |
| 2. |  |  |
| **Job Development, Placement, and Retention Services** | 1. |  |  |
| 2. |  |  |

Attachment 4: Memorandum of Agreement or Letter of Commitment

***Memorandum of Agreement or Letter of Commitment*:** Each partner\* must demonstrate their commitment to the design process for this initiative. Each partner must also outline their role and anticipated activities. Each partner’s commitments, roles and activities must be provided either through a signed Memorandum of Agreement (MOA) among partners or through the submission of letters of commitment. See Section 2 for more information about required partner commitments.

\*Please note: this includes all required partners **AND** additional partners.

Attachment 5a and 5b: Program Design Phase Budget Form

***Program Design Phase Budget and Budget Narrative Forms*:** Applicants are required to submit a separate budget form, narrative and match contribution form. Budget amounts must be reasonable and consistent with proposed activities. Refer to Attachment 5a/5b: Program Design Phase Budget and Budget Narrative in your application package for instructions to complete the budget.

1. ***General Instructions:*** the proposed budget must be submitted using the following attachments provided in MS Excel file format:
   1. Budget Form (Attachment 5a)
   2. Budget Request Narrative Form (Attachment 5b)
2. ***Budget Form (Attachment 5a):*** serves as a cover sheet to the Budget Request Narrative and Match Contribution Forms. Although it is formatted with formulas, please check all amounts for accuracy prior to submission.
3. ***Budget Request Narrative Form (Attachment 5b):*** outlines all of the project costs for which you are requesting grant funds. This budget should be based upon design phase duration (three months). Each line item amount should have clear and sufficient cost rationale. Applicants must complete the following columns for each line item for which they are requesting funds:

* ***Actual Cost (AC) or Cost Allocation (CA):*** Please identify whether these expenses will be charged based upon actual costs or a cost allocation plan.

Please note: Applicants awarded funding will be required to provide a copy of their cost allocation plan during contract negotiations. If the cost allocation plan does not include sufficient detail or is updated on a monthly or ongoing basis, this updated information must be included along with other required back-up during specified monthly invoices. Any changes to this plan must be submitted to Commonwealth Corporation for the duration of the grant.

* ***Description of use of funds:*** Please include a description to explain how funds will be used.
* ***Calculations:*** To reduce calculation errors, please use these two columns to include the rate and unit of measurement used to calculate each line item. Instructions for specific line items are included below in the Category Instructions. Applicants may include additional detail in the ***description of use of funds*** column to explain any expenses that do not conform to the standard unit of measurement @ rate calculation format.

Please follow the Category Instructions below for completing the Budget Request Narrative Forms and remember to *check all amounts* for accuracy prior to submission.

**Category Instructions**: Budget Request Narrative Form

A. **Salary & Fringe**

Salary: This category is for project costs related to staff that will be performing project-related functions and will be on the payroll of the lead applicant only.

The budget should include:

* each staff person (name, if known and job title) on a separate line
* actual rates of pay each staff person will receive for compensation in the column labeled “Rate/hour”
* the quantity of hours each staff person will work on this grant in the column labeled “hours”

Grantees may not invoice Commonwealth Corporation for staff roles that are not included on the budget in the contract. Grantees may charge a higher hourly rate than the rates listed in the budget in the contract. However, grantees are responsible for ensuring that the staffing structure outlined in the contract is maintained. Commonwealth Corporation will not approve a modification to add additional funds to staffing in order for the grantee to maintain the staffing structure included in the contract. Therefore, we encourage all grantees to review any significant staff changes with Commonwealth Corporation prior to making the change to ensure an adequate staffing structure is maintained. Applicants should factor in any proposed increases over the grant period into the average hourly rate.

Fringe: This line item is for fringe benefits for internal staff. The budget should include the percentage used to calculate the actual budgeted dollar amount. The budget should also include details about the benefits included in rate and the rate associated with each benefit.

B. **Other Program Costs**

Travel:This category is forlead applicantstaff travel required to achieve the project goals. The budget should include a description indicating the need for the proposed travel, destinations, and mode of travel. The budget should include the mileage rate in the column labeled “rate” and the total number of miles in the column labeled “unit.” Mileage will not be reimbursed beyond the current federally approved rates. **Please keep in mind the mandatory meeting schedule when constructing your budget.**

Space Rental**:** This category is for space rental related to project activity. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis the actual monthly cost of rent should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Telephone & Communications**:** This category is for telephone and other communication costs related to project activity. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis the budget should include the actual monthly cost of telephone & communications in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Equipment Rental & Lease**:** This category is for rental or lease of office equipment necessary for implementation of the project. The budget should include a list of items to be leased. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis include the actual monthly cost of equipment rentals in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Equipment Purchase**:** This category is for equipment purchases. The budget should include a list of items to be purchased. The budget should include the cost of the item in the column labeled “rate” and the total number of units that will be purchased in the column labeled “unit.”

Postage & Mailings**:** This category is for postage and mailing related to project activity. The budget should include a description of the use of these funds. If funds will be allocated on a cost allocation basis, the budget should include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis over the duration of the grant, the budget should include the total cost of postage in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Publication/Print/Copying**:** This category is for publication, printing and copying related to project activity. The budget should include a description of the use of these funds. If funds will be allocated on a cost allocation basis, include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be allocated on an actual cost basis over the duration of the grant, include the total cost of publication, printing and copying in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Meeting Expenses**:** This category is for meeting expenses related to project activity. The budget should include a description of the use of these funds. The budget should include a meeting cost rate in the column labeled “rate” and the total number of meetings that will be held over the duration of your grant in the column labeled “unit.”

Office Supplies & Materials**:** This category is for office supplies related to project activity. The budget should include a description of use of these funds. If funds will be allocated on a cost allocation basis, the budget should include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis over the duration of the grant, the budget should include the total cost of office supplies & materials in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Marketing & Advertising**:** This category is for marketing and advertising related to project activity. The budget should include a description of use of these funds. The budget should include the cost of the advertisement in the column labeled “rate” and the number of times you plan to run the advertisement in the column labeled “unit.”

Training Materials**:** This category is for expenses related to the purchase of training materials related to project activity. The budget should include a description of the training materials. The budget should include the cost per unit of the training materials in the column labeled “rate” and the cost per unit in the column labeled “unit.”

C. **Contracted Services**

Contractors:This category is for expenses related to contracted services, including any contracted services to fulfill required staffing roles. The budget should include a description of the use of funds including the name of the organization or individual that will be contracted to perform this service. The budget should include the hourly rate in the column labeled “rate” and the quantity of hours each task will require in the column labeled “unit.” Each contractor should be listed on a separate line.

D. **Indirect Costs**

This category is for indirect costs. Indirect costs are costs incurred for common or joint objectives that are not easily identifiable to a single grant and benefit multiple programs. Grantees must apply indirect costs through the use of **an approved indirect cost rate or an approved cost allocation plan**. A copy of the cost allocation plan must be supplied during contract negotiations. Any changes to this plan must be submitted to Commonwealth Corporation for the duration of the grant.

Attachment 6: Certificate of Good Standing from the MA Dept. of Revenue

All lead applicants\* must submit a Certificate of Good Standing from the Massachusetts Department of Revenue. This should be included in your Qualifications Submission Package and labeled Attachment 6. **\*Please note that community colleges, public vocational technical high schools, and public state universities serving as the lead applicant do not need to submit a Certificate of Good Standing. Organizations in this category should upload a brief document stating this exemption.**

Please follow this guidance when requesting and submitting a Certificate of Good Standing:

* The **Certificate of Good Standing (C.O.G.S.)** is **NOT** the same as and should not be confused with a **Certificate of Incorporation** from the Secretary of State
* C.O.G.S. must be less than six months old
* Please visit the Department of Revenue’s website:

(<http://www.mass.gov/dor/businesses/programs-and-services/certificate-of-good-standing.html>) for more information about the C.O.G.S. and to complete an online application to obtain a Certificate

* Applications for a C.O.G.S. can take 4-6 weeks to be processed

1. <https://www.mass.gov/service-details/view-your-regions-blueprint> [↑](#footnote-ref-1)
2. <http://www.mdrc.org/publication/implementing-workadvance-model> [↑](#footnote-ref-2)
3. MassHire Workforce Board staff have substantial knowledge about business demand for workers in their region. They can also identify opportunities to leverage local publicly-funded workforce development system capacity. Many MassHire Workforce Boards have staff with experience in designing and managing sector strategies initiatives and in convening and facilitating industry sector partnerships. Applicants can access a list of MassHire Workforce Boards at the following link: https://www.mass.gov/service-details/connect-with-your-local-masshire-workforce-board [↑](#footnote-ref-3)