

Phone: 352-873-7939 Fax: 352-873-7910 www.careersourceclm.com

Youth Services Provider

Directions for completion and submittal

Invitation to Negotiate

TIMELINE:

Public Notice: December 12 - 20, 2024

ITN Release Date: December 12, 2024

Expression of Interest (EOI) Due: January 3, 2025, 4:00 pm

Notification of Qualification: January 10, 2025

Question & Answer Period and Career Center Tours: January 13 - 15, 2025

Posting of Questions and Answers: January 16, 2025

ITN Submission Due: February 7, 2025, 4:00 pm

Staff Review: February 10 – 12, 2025

Management Team Interviews: February 17 – 18, 2025

Executive Committee Action: February 26, 2025

Preliminary Budget Negotiation: February 27-28, 2025

Final Contract Negotiation: March 3-7, 2025

Final Board Action: March 12, 2025

Transitional Period: June 2025

Initial Contract Period: July 1, 2025 through June 30, 2026

CareerSource Citrus Levy Marion is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. All voice telephone numbers listed above may be reached by persons using TTY/TDD equipment via the Florida Relay Service at 711. If you need accommodations, please call 352-840-5700, ext. 7878 or e-mail <u>accommodations@careersourceclm.com</u> at least three business days in advance. Additionally, program information may be made available in Spanish upon request. A proud partner of the American Job Center network.

PURPOSE:

CareerSource Citrus Levy Marion (hereafter referred to as CSCLM) issues this Invitation to Negotiate (ITN) to solicit innovative youth workforce development programs to operate under the provisions of the Workforce Innovation and Opportunity Act in Local Workforce Development Area 10 which is made up of Citrus, Levy, and Marion Counties. CSCLM intends to be as inclusive as possible in the solicitation. The aim is to receive a wide variety of innovative proposals that best meet the needs of the area at large.

The Workforce Innovation and Opportunity Act (WIOA, Public Law 113-128) provides the framework for a national Workforce preparation system that is flexible, responsive, customer-focused and locally managed. In Citrus, Levy, and Marion counties, CSCLM envisions a system that meets the needs of residents and businesses alike. The goal of programs under the Act is to increase employment, job retention, earnings and develop the work potential of the residents within our counties.

DESCRIPTION OF CSCLM ONE STOP SYSTEM:

CSCLM delivers all programs and services to customers through its One Stop System. This system is developed around both a "physical front door" and through "electronic access". The system includes connectivity between the various partners and service providers. The goal of the One Stop System is to provide full-service, staffed sites, offering services which assist individuals in obtaining employment through an individualized mix of career services and training-related activities. This ITN is focused on services and programs for Workforce Innovation and Opportunity Act (WIOA) eligible youth.

Responses may be submitted by a single entity or by a group of organizations or agencies that have agreed to work cooperatively to deliver services and achieve desired outcomes. If Responses are submitted by a group, a single lead entity must be designated for contracting purposes.

CSCLM reserves the right to select none of the Responses made to this ITN. Nothing obligates CSCLM to pay the cost of Response preparation and submission. Final contract approval with the selected organization(s) for WIOA Youth Services will be subject to negotiation.

Questions regarding the ITN should be directed to:

<u>Itrowbridge@careersourceclm.com</u>. All questions must be submitted in writing to this e-mail address. All questions will be compiled with answers and posted on our website at: <u>https://careersourceclm.com/about-us/work-with-careersource-clm/</u>

No questions will be addressed individually.

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PART I: GENERAL INSTRUCTIONS

Deadline for Receipt of Response

Full Responses to this ITN must be **received by 4:00 p.m., February 7, 2025.** Responses received after that date and time will not be considered. Please note the time-table listed on the front page of these instructions. Crucial dates to remember are:

- Expression of Interest Due: January 3, 2025 by 4:00 p.m.
- Staff Review: January 6-10, 2025
- ITN Submission Due: February 7, 2025 by 4:00pm

Electronically transmitted documents will not be accepted. Respondents are responsible for ensuring that Responses meet all the requirements set forth in this ITN, and for ensuring that Responses are received on time.

Where to Mail Responses & Number of Copies Needed

Submit one hardcopy and one (1) electronic copy to:

Larry Trowbridge CareerSource Citrus Levy Marion 2703 NE 14th Street Ocala, Florida 34470

Contract Period

Any response submitted should be based upon a one-year period of performance. Contracts will be renewable up to a total of a four year period of time (three renewals after initial contract), based upon performance, and will be renegotiated annually.

One Stop System

A list of current Career Centers and Participating Partners is noted in Attachment 4. All Youth Service Providers will work closely within our One Stop System and must be prepared to have representation within each center covered by the submission.

Anticipated Budget

Funding for this current year is being released for informational purposes only. This funding is allocated between the three counties based on percentages for In-School and Out-of-School Youth. Please keep in mind that the numbers displayed here are based on the current program year. Actual funding is dependent on allocations made at the federal and state level.

This should assist you in projecting the level of services to be provided.

Total Youth Allocation \$766,000

- Operating without Work Experience: \$454,006
- Operating with Work Experience: \$109,434
- Participant without Work Experience: \$ 87,621
- Participant with Work Experience: \$114,939

As you see there are two categories of services: 1) In School Youth and 2) Out of School Youth. You may respond to only one category or you may respond to both categories. This will be the same advice for the three counties. You may respond for as many counties as you wish although <u>a comprehensive response</u> that involves the whole workforce area is preferable. Coordination with the respective school districts is highly desirable and additional consideration will be given to programs that bring in financial resources and demonstrate these additional resources in their grant response.

Technical Questions

Any technical questions regarding how to respond to this ITN should be directed to <u>ltrowbridge@careersourceclm.com</u>. All questions will be gathered, answered, and distributed to all interested and qualifying parties via e-mail. **Questions will not be answered on an individual basis**. **Questions and answers will only be distributed to <u>qualified</u> respondents after the Expression of Interest period.**

One Stop Center Review

Career Center reviews/tours will be made available to interested and <u>qualified</u> <u>respondents</u>. Respondents that wish to review the Career Centers must state so in their Expression of Interest letter. Times and dates of requested reviews will be mutually decided upon between the respondent and CSCLM management.

Career Center reviews will be a scripted tour of Centers including introductions to partners and a briefing on services that are available with any projected changes. Any questions asked that are outside of the scripted tour will be answered in writing as referenced above. This method is being used in order to guarantee the distribution of consistent information to all interested and qualified parties.

Current Contractor/Clients in Active Service

CSCLM currently has in place contractual agreements for the services solicited in this ITN. If the selected organization(s) is other than the current provider(s), CSCLM will assist in the transition to a new provider. Transition will take place during the month of <u>June 2025</u>.

Because WIOA youth services are currently in place and operating, a number of customers will be in an active service mode as of July 1, 2025 (the effective date of the agreement covered in this ITN). The successful respondent(s) to this ITN will be expected to incorporate all active customers into their plan of service.

Who May Apply

All governmental and non-governmental agencies, whether operated for profit or nonprofit, may apply for funding. Each respondent must be a legally recognized entity that has received appropriate licenses prior to submittal of the response.

No response will be accepted from an entity if it has not been pre-qualified during the **Expression of Interest** period and if:

- The entity has been debarred, suspended, or otherwise determined to be ineligible to receive funds by an action of any governmental agency; or,
- The entity has not complied with an official order of any agency of the State of Florida or the United States Department of Labor to repay disallowed costs incurred during its conduct of projects or services; or
- The entity's previous contract(s) with the CSCLM have been terminated for cause; or
- The entity's name appears on the State's convicted vendor list; or
- The entity appears on the Scrutinized Companies that Boycott Israel list
- The entity appears on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List
- The entity is engaged in business operations in Cuba or Syria
- The entity appears on the convicted vendor list
- The entity appears on the state's discriminatory vendor list
- For any other good and just causes.

Profit charged by private for-profit entities must be fair and reasonable. Such profit will be reviewed in conjunction with the requirements of 2 CFR Section 200.323 U.S. Office of Management and Budget.

Each organization that submits a response must be capable of supporting its own operation. Payment is made on a performance driven/cost reimbursement basis after the organization(s) selected submits invoices.

Authorized Signatures and Contact People

- The individual who is legally authorized to submit the Response for the respondent must sign the response.
- The response must provide the name, title, address, e-mail address and telephone number of the person who has the authority to negotiate on behalf of the organization and to bind the organization to a contract.
- The response should also list a contact person who is usually available to answer questions about the response.
- If a single response is submitted on behalf of more than one organization, a lead agency should be designated by all parties to provide all the information requested in this section.

Expression of Interest (EOI) Evaluation

- Expression of Interest documents will be reviewed by CSCLM staff.
- Prior to the continuation in the ITN process, a full determination will be made about the demonstrated ability of the organization(s) to perform successfully under the terms and conditions of the proposed program. Determinations will take into consideration such matters as whether the organization has:
 - Adequate financial resources or the ability to obtain them;
 - A qualified management team;
 - The ability to meet the program design specifications at a reasonable cost, as well as the ability to meet specified performance goals;

- A satisfactory record of past performance in related areas, including demonstrated quality of services, the ability to provide for or arrange for appropriate supportive services, opportunities for training, skill attainment, placement and retention in employment, and earnings rates of customers;
- A satisfactory record of business ethics, integrity, and fiscal accountability;
- The necessary organizational experience; accounting, data base, and operational controls; and
- > The technical skills to perform the work;
- > Quantifiable performance history in workforce development

The respondent is responsible for including information in the Expression of Interest that will allow the Workforce staff to evaluate these matters. All respondents will be notified of their qualification status on <u>January 10, 2025</u>.

ITN Evaluation

The Review Tool that the Workforce staff will be using to perform the review and rating is included in this ITN packet as attachment 8.

- The review of the written response to this ITN will be conducted by Workforce staff with completion scheduled for February 12, 2025.
- All respondents who are considered to be responsive to the ITN directions may be scheduled for Management Team interviews at CSCLM's discretion. These will occur February 17 and 18, 2025 if required.
- Results of the review process will be presented to the CSCLM Executive Committee and is scheduled for completion February 26, 2025.
- Final Contract Negotiation is projected to take place March 3-7, 2025.

Other Required Information

- Copy of most recent Annual Audit
- Resumes of key management and program supervisory staff
- > Job descriptions and pay grades for all staff involved in services
- Salary structure of organization
- Performance information for the past three years of operation, most importantly placement and retention. Either the State of Florida Monthly

Management Report (MMR) or State or local workforce development board certified performance measures that relate to the Performance Measures for youth within the State of Florida. See the following website for the State's Monthly Management Reports:

http://www.floridajobs.org/local-workforce-development-board-resources

- Background and details of organizational experience, including involvement in a current One Stop System.
- Service Plan; include number of customers served and in what activities.

PROFESSIONAL IMAGE

PROFESSIONAL IMAGE – Dress Code

Professional image consists of both our "professional appearance and attire". Whether the attire is professional business or professional casual, the overall personal appearance should always reflect professionalism. CSCLM has a Professional Image policy and is subject to change. A full copy may be requested bv e-mailing: Larry Trowbridge at Itrowbridge@careersourceclm.com and placing "Professional Image Policy Request" in the subject line. No other text should be included in the e-mail outside of a signature line. Any additional questions included in the e-mail will be subject to formal procedures of addressing as previously stated.

Employees are expected to consider the events and activities of the day when determining what to wear.

Name tags are required to be worn at all times in the CSCLM Centers.

Award Process and Limitations

Once the youth service provider(s) has been selected, preliminary negotiation of the contract will begin in February 2025. The overall budget of CSCLM is solely determined by the actions of the Legislature and CareerSource Florida, Inc. (CSF). CSCLM will conduct final negotiations as soon as a determination can be made for the budgetary figures. However, the final contract offering is subject to the budgetary process of the Legislature and CSF and may be changed by CSCLM at any time.

Cost Reimbursement/Performance Based Contract

CSCLM intends to award a cost reimbursement/performance based contract(s) to one or more organization(s) providing services for the WIOA Youth Services. The final contract(s) will contain provisions for contract cancellation or renegotiation based on negotiated performance levels as set by the DEO, CSF and CSCLM goals as finalized during contract negotiation.

Expected measurable performance goals will be negotiated each contract year with the service provider(s) chosen and the performance goals will be placed in their contract. It will be expected of the chosen service provider(s) to meet if not exceed the negotiated youth performance goals.

The development of specific contract provisions detailing how funds will be tied to performance standards will be a significant part of the negotiation process

CSCLM intends to provide monitoring and oversight activities designed to identify and correct any operational or financial deficiencies. Any service provider(s) selected to provide WIOA youth services will be required to work closely with monitoring staff in the execution of these activities.

Monitoring of performance against outcome measures will be conducted at least quarterly. Failure to achieve desired outcomes may result in contract cancellation, re-negotiation or non-payment of profit.

Method of Solicitation

Section 287.057 of the Florida Statues provides that in certain circumstances

where an agency determines "... that an invitation to bid or a request for propopsals (RFP) will not result in the best value..." it can opt to use an Invitation to Negotiate (ITN).

As mentioned above, the RFP process focuses on price as part of the process of selection with issues such as quality of services, past performance and other such factors weighed with cost in making a determination. There are several problems with using this process.

First, while we know our budget for this year, our funding for the coming years is uncertain. Because of this, we will need to negotiate a final contract amount in the months immediately following the Legislative session (May-June). Requesting quotes would be unrealistic as the budget is dependent on legislature.

Secondly, the Board has stressed high-level performance. This concern, measured by our performance reports, focuses our decision-making on service providers who have experience in Florida and have a record of achievement which we can compare using the performance data and monthly management reports.

Finally, our selection of a provider is really a selection of the local management team. The local team, its authority in relationship to its agency's executives and board of directors, will all determine how much flexibility the staff has in meeting the ever-changing demands that we face from the State as well as our own business communities. The selection process should allow for us to interview the proposed local management team's key staff.

In short, we are seeking highly skilled professional Workforce management services for WIOA youth, not the lowest bid.

This method will result in our region acquiring the best technical Responses and quality of services.

Public notice of this ITN occurred December 12-13, 2024. All known organizations recognized as being involved in the provision of services solicited were sent a notification of this ITN. All requests for copies of this ITN will be honored and is available on our website.

The method of solicitation represented herein, as well as the selection process detailed, are in accordance with the laws governing the fund sources expected to be used in contracting for the services solicited.

CSCLM reserves the right to request additional information in support of the Response and/or to ask the respondent to make a presentation about the Response. In particular, CSCLM may ask to examine an organization's personnel policies and grievance procedures.

The successful respondent(s) will participate in negotiations and, prior to the final award of a contract, will submit any budget, technical and/or other revisions to the Response.

CSCLM reserves the right to reject any and all Responses submitted and/or to negotiate with all qualified sources. Receipt of a Response does not commit CSCLM to award a contract, pay any costs associated with preparation of the Response, or reimburse a contractor for any costs incurred prior to the signing of a contract agreement.

The contract award will be based on review and rating of the Responses. The final amount of the contract will be determined during contract negotiations. Final award of a contract is contingent upon:

- Successful negotiation of an agreement;
- Acceptance by the respondent of the contract terms and conditions;

- Satisfactory verification of past performance, where applicable; and
- Acceptance by the respondent of responsibility for achieving contract goals and objectives.

CSCLM intends to provide all youth service providers technical assistance, if necessary, in the delivery of listed activities and services including, where applicable, necessary forms, written policies and procedures, and equipment.

Transition

The CSCLM-owned computers are available in sufficient quantities for staff support and learning laboratory operation, if required. CSCLM will provide the youth service provider(s) with technical support for installation and ongoing maintenance of the computer equipment provided by the Board. Otherwise, the service provider will be solely responsible for the conduct of all activities and services described.

No changes, modifications, or additions can be made to the Responses after the submittal deadline unless CSCLM makes such request of all respondents. The Board reserves the right to waive any minor technical irregularity.

Stevens Amendment

CareerSource Citrus Levy Marion Services for the In-School and Out of School Youth Program is supported by the Employment and Training Administration of the U.S. Department of Labor as part of an award totaling \$14,500,000.00 with no percentage financed from non-governmental sources.

Appeal Procedures

Any organization that submits a Response to CSCLM will receive fair and unbiased consideration.

In accordance with the CSCLM regulations, respondents who are denied funding have the right to appeal. The following steps must be taken for organizations to appeal funding decisions.

Submit a letter of protest addressed to:

Carl Flanagan, Chairman CareerSource Citrus Levy Marion 2703 NE 14th Street Ocala, FL 34470

Within ten (10) days of the final decision.

PART II

Expression of Interest

Package

PART II: EXPRESSION OF INTEREST PACKAGE

A pre-qualification review will be conducted regarding all expression of interest respondents for the Youth Service Provider(s) sought through this ITN.

This Expression of Interest Package must be submitted in its entirety.

SUBMISSION DUE DATE: January 3, 2025, 4:00 pm

CONTENTS OF PACKAGE:

- 1) Cover Page (Attachment 1)
- 2) General Information Table (Attachment 2)
- 3) Certifications (Attachment 3)
 - Drug-Free Workplace Certification
 - Debarment & Suspension Certification
 - Certification Regarding Lobbying Activities
 - Sworn Statement on Public Entity Crimes

4) Business Papers

- For Private Incorporated Organizations:
 - Copy of the most recent annual/audit report on file with the appropriate state agency, or
 - Copy of Articles of Incorporation and Charter Number
 - State of Incorporation

• For Private Unincorporated Organizations:

- Copy of appropriate business or occupational license
- For Non-Profit Organizations:
 - Copy of the most recent audit report or
 - Copy of Articles of Incorporation and Charter Number
 - State of Incorporation

- 5) Letter stating your interest.
 - Include Legal Corporate Name and DBA if applicable.
 - Corporate Address and Telephone number
 - List of officers and members of the Board of Directors
- 6) Qualifications of Business:
 - Resumes of Management and top Supervision Staff (Local and Corporate)
 - Job descriptions of all other staff
 - Summary (no longer than 4 pages, 12 font, single space) of Business involvement in providing youth services as they relate to the contents of this ITN. List dates and locations.
 - Supporting Performance Data for the past three years as proof of ability to run youth programs. For Florida organizations, include copy of the Monthly Management Reports for the past three years. For out of state organizations, submit performance in measurements that relate to Florida's measures for the past three years, and have these measures validated by either the State or local Workforce Board. See State of Florida's Performance Reports at the following website: <u>http://www.floridajobs.org/local-workforcedevelopment-board-resources</u>
 - Listing of Organizational Experience, resume format.
 - Organizational Chart that details flow, parent company, support levels.
- 7) Contact Person, Telephone Number, Fax and e-mail.

One original and one (1) electronic copy of the Expression of Interest Package should be mailed to:

Larry Trowbridge CareerSource Citrus Levy Marion 2703 NE 14th Street Ocala, FL 34470

Package is due no later than 4:00 pm on January 3, 2021

All entities that submit an Expression of Interest package will be notified of ability to continue with ITN process. Notification will be sent via e-mail no later than January 10, 2025.

PART III

ITN INSTRUCTIONS

PART III: WORKFORCE INNOVATION and OPPORTUNITY ACT YOUTH SERVICE PROVIDER FULL ITN RESPONSE PACKAGE

Youth Eligible to Receive Services

Eligible youth will meet WIOA guidelines listed in the WIOA section 129 for In-School and Out-of-School, ages 14 through 24. Up to five percent of the youth participants in each local area may be persons who would be covered individuals, except that the persons are not low-income individuals. The WIOA requires a minimum of 75% of funds to be used for Out-of-Schools services as defined in WIOA section 129 (a) (4) (A).

Program Parameters and Description of Services Sought

Section 129 (c) (1) (A) through (N) of the Act requires 14 elements that must be provided in all youth programs. All responses should address how each is delivered:

- Provide preparation for secondary education completion or post-secondary credential
- Alternative secondary school services, or dropout recovery services
- Paid or Unpaid work experience opportunity development
- Occupation skills training
- Education offered concurrent to workforce education
- Leadership development opportunities
- Supportive services
- Adult mentoring for the period of participation and a subsequent period for a total of not less than 12 months
- Follow-up services for not less than twelve (12) months after participation completion
- Comprehensive guidance and counseling
- Financial literacy education
- Entrepreneurial skills training
- Labor market and in-demand industry and occupation information
- Postsecondary transition services

Technical Questions

Any technical questions regarding how to respond to this ITN should be directed to <u>ltrowbridge@careersourceclm.com</u>. All questions will be gathered, answered and distributed to all interested and qualifying parties. **Questions will not be answered on an individual basis**.

<u>RESPONSE CONTENT AND INSTRUCTIONS: WORKFORCE INNOVATION</u> AND OPPORTUNITY ACT YOUTH SERVICE PROVIDER (Scope of Work)

DUE: February 7, 2025 by 4:00 pm.

Format Requirements

Prepare the Response as follows:

- Use the same topic headings, in the same order, as described in <u>Response</u> <u>Outline</u>, below.
- Answer all requests for data or information, or mark the information "Not Applicable".
- Type or word-process all responses.
- Use 12-point font.
- Copy all pages and forms on only one side of the page.
- Attach all requested documentation to the back of the Response, and label it clearly.
- Number all pages of the Response, including the attachments.
- Submit an original, marked "Original", and one (1) electronic copy of the complete Response no later than February 7, 2025 4:00 pm.
- Responses should be clipped and not sent in binders.

Helpful Tips

Please remember that to be competitive, respondents must:

Remember that clarity and completeness are essential.

- Use specific details to describe: all program activities and tasks; the
- objective measurement of those activities and tasks; and the knowledge, skills, and abilities to be acquired by the customers.
- A journalistic outline of "Who? What? When? Where? How? Why? How Much?" can be helpful here.

WIOA Youth Services Response Outline and Required Content

All Responses must follow the outline below.

1. Cover Page

Complete the cover page provided in <u>Attachment 1</u>.

2. Table of Contents

Paginate the complete document and provide a table of contents indicating the beginning page for each section and major subsections of the Response, including each attachment. Provide section dividers that relate to the table of contents and submit clipped copies and original. Do not have professionally bound or put in 3-ring binders.

3. Response Summary

Summarize the Response, including any unique or innovative aspects that may set your organization and/or your Response apart from others.

If the Response represents a joint submittal by more than one agency or organization, list all partners and briefly describe the role of each in service delivery.

List the individual with the authority to negotiate and bind the respondent to a contract. Include: name, title, organization represented, full mailing address, full e-mail address, if available, telephone number, and fax number.

List the individual who is usually available to answer questions about the Response. Include: name, title, organization represented, full mailing address, full e-mail address, telephone number, and fax number.

4. Description of Organization and Staff Qualifications

Describe the organization's mission, history, and major funding sources. How does the organization fit into the community? What does your program intend to accomplish?

How do the administrative structure, staff qualifications, and successful experience with similar projects qualify the organization to provide youth services? Include documentation of the success rates of previous projects, including statistical information to include up to five (5) summaries from the results of past customer surveys, program completion rate, job placements, credentialing, etc.

Describe the staff positions that are participating in the project and include job descriptions. What level of experience will the staff be expected to have? How will staff be selected? Provide resumes of any existing staff that will be included in this project. Provide full resumes of proposed management, and complete staff. If the Response is from two or more organizations, explain how those organizations achieved the coordination necessary to submit the Response and how that collaborative effort will be maintained throughout service delivery.

Describe how the organization will financially support the costs of the program until a reimbursement can be requested for actual program expenditures. Include a description of how the organization will be able to cover the costs until any performance holdback is earned and reimbursed. Describe administrative and financial management capabilities of the organization. How will contracted funds be kept separate from other funds? How will financial information be made available for monitoring and auditing purposes?

Describe the process your organization uses to capture and report information on program participants. What kind of program evaluation of program operations and staff are routinely carried out?

Provide a list of seven references that includes agencies and individuals with first-hand knowledge about the organization's performance in serving and placing customers into employment. Each reference should include a current address and telephone number.

5. Work Plan, including plans for each of the following (Service Provider):

Describe how the organization will coordinate service delivery with youth through CSCLM's Centers and with the other employment and training partners in the three county workforce area.

Prepare a time line for full operation of services, assuming full operation of a contract by July 1, 2025. At a minimum, include:

- Hiring of staff;
- Training of staff;
- Preparation of space—furniture and equipment is in place, discuss moving in time and readiness to begin functions;
- Begin case management for existing cases;
- Begin accepting new applicants/referrals; and
- Full operation in place—all services functional, all agreements in place.

6. Required WIOA Youth Elements and Program Description:

The program description should describe the process that your organization will take from day one of the contract until the end of the period, June 30, 2026. The description should include start-up activities, outreach and recruitment, assessment and referral, eligibility determination, development of an individual service strategy, goal setting process, case management process and documentation, the management and coordination of service delivery with goal attainment, methods used to verify setting and attaining goals.

Include in your program description how the following program elements may be provided through coordination, in-kind services, or budgeted in the response. If the respondent does not provide a required program element, the proposal should state who the respondent will partner with to provide the element, and how the participant will access the required element. A letter of confirmation from the partner should be included in the proposal to substantiate the relationship and provision of the required element.

Required program elements from WIOA Section 129 (c) (1) (A) through (N) as listed on page 26 of this ITN.

7. Goals/Objectives and Performance Levels: Provide a narrative description of the goals that your program plans to address. <u>Complete</u> <u>Attachment 5</u> illustrating the planned numbers for enrollments and performance outcomes.

8. Target Group(s): Describe the groups of youth that your program is targeting. Is your target group based on a characteristic, a demographic or a geographic factor? Describe any barriers that the program is specifically targeting and relate this target group back to the WIOA goals and outcomes. Barriers need to be highly considered.

In addressing the target groups, please keep in mind that CSCLM is participating in partnerships aimed at the strengthening of our youth. Please describe your approach to the following:

- Support toward the development of Career Academies, a partnership that is a strategic focus of the CSCLM.
- How your staff has, or will be trained to interact with at-risk populations.
- What safety or defense training has, or will be provided to staff to handle any potential issues when dealing with at-risk youth.
- Occupational certifications offered to the youth and description of program integration and selection of certifications based on region.
- Ability to plan, work with community partners and implement new programs based on community need.

9. Facilities: Where will the program operate? Provide some method of assurance that the site selected is capable of housing the program. Provide assurance that the site is accessible, safe, and "youth-friendly". The operation of programs are currently carried out at various locations, i.e., CSCLM career centers, County School Board locations, and other Department of Juvenile Justice facilities in the tri- county area.

10. Partnerships: Describe any partnerships that will be used in the project. Who is involved? What are the roles and responsibilities of each partner? Also elaborate on your organizations ability to coordinate community wide projects such as CSCLM's recent YouthBuild project – Phoenix Rising. Give examples of such projects and the community support that was achieved during the project(s). Please list the names of community partners involved and the outcome of each project.

11. Experience: Outline all youth programs that you have operated during the last three years. Provide a brief description, funding sources, performance information, and references. If you have not operated youth programs in the past, outline programs that provide similar services in which you have been involved over the last three years. Describe ability to be responsive to the CSCLM. Our world is a rapidly changing world. How responsive is your organization in making changes when requested by the workforce board?

12. Budget Narrative: <u>Complete Attachment 6</u> with budget information. Provide a detailed narrative that explains the information on the budget form and justifies the requested funds. Include a summary of the in-kind services in the program, how they will be provided, by whom, and an estimate of the value. The budget narrative should provide a total number of youth to be served <u>and</u> the 'cost per' for each youth based on the overall budget.

13. Performance Objectives for services sought

Performance is a critical portion of this response - discuss in detail and in depth. Under WIOA, all regions must meet certain, quantifiable Performance Measurements each Program Year. These performance measures are determined on a yearly basis and are included in the contract. The State of Florida has developed performance reports, the "Monthly Management Report" and "Performance Funding Model (PFM)" report. The development of the proposal and the resulting activities should support the region's efforts to obtain a top quartile performance placement on these reports. For your reference in reviewing this report, we are local workforce development area 10 and the report can be found at:

http://www.floridajobs.org/local-workforce-development-boardresources

14. Reasonableness of Cost

<u>Complete Attachment 7</u> with a listing of positions in your agency along with salary range. Use as many copies as necessary. PART IV

ATTACHMENT 1

Cover Page

RESPOND TO: Larry Trowbridge CareerSource Citrus Levy Marion 2703 NE 14th Street Ocala, FL 34470

Invitation to Negotiate – Youth Services Provider

July 1, 2025 through June 30, 2026 Proposing Organization's Legal Name and Address

Organization's Federal Tax Identification Number		
Organization's Florida Tax Identification Number		
Organization's Unemployment Insurance Number		
Organization's Workers' Compensation Insurance Number		
Name of Contact Person (For questions about Response)		
Telephone Number of Contact Person		

FOR WORKFORCE BOARD STAFF USE ONLY		
Date Received: Time Received:		
Received by:		

ATTACHMENT 2

General Information

GENERAL INFORMATION

Name of Organization	
Type of Business	
Internet Address	
Number of Full Time Employees	
Unique Entity Identifier (UEI)	
CAGE number	
Federal Tax ID	
EPA ID #	
Total Bonding Capacity	\$
Address	

ATTACHMENT 3

Certifications

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER MATTERS

- 1. The prospective primary participant certifies to the best of its knowledge and belief, that it, and its principals:
 - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transaction by any federal department or agency;
 - b. Have not within a three (3) year period preceding this Response been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or Contract under a public transaction; violation of federal or state anti-trust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c. Are not presently indicated for or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses enumerated in 1b. above, of this certification; and
 - d. Have not, within a three (3) year period preceding this application/Response had one or more public transactions (federal, state, or local) terminated for cause or default.
- 2. That if the prospective primary participant is unable to certify to any statements in this certification, such prospective primary participant shall attach an explanation to the Response.

Name & Title of Authorized Representative

Signature

Date

CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

- 1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal Contract, grant, loan, or cooperative agreement.
- 2. If any other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal Contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form--LL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- 3. The undersigned shall require that the language of this certification can be included in the award documents for all subawards at all tiers (including SubContracts, subgrants and Contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Contractor/Name of Certifying Official

Signature of Certifying Official

Date

CERTIFICATION REGARDING A DRUG-FREE WORKPLACE

I, ______, an authorized representative of the Contractor do hereby make the following certification with respect to the execution of responsibilities assigned to the WORKFORCE by the Workforce Innovation and Opportunity Act and WAGES, and the Drug-Free Workplace Act of 1988. The Contractor will:

- a. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Contractor's workplace and specifying action that will be taken against employees for violation of such prohibition;
- b. Establish a drug-free awareness program to inform employees about:
 - 1. The dangers of drug abuse in the workplace;
 - 2. The Contractor's policy of maintaining a drug-free workplace;
 - 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Make it a requirement that each employee to be engaged in the performance of the Contract be given a copy of the statement required by paragraph (a) of this certification;
- d. Notify the employees in the statement required by paragraph (a) of this certification that, as a condition of employment under the grant, the employee will:
 - 1. Abide by the terms of the statement; and
 - 2. Notify the Contractor of any criminal drug statute conviction, for a violation occurring in the workplace, no later than five (5) days after such conviction; and
 - a. Notify the WORKFORCE within ten (10) days after receiving notice under this subparagraph (d) (2), from an employee or otherwise receiving actual notice of such conviction;

- f. Take one of the following actions, within 30 days of receiving notice under the subparagraph (d)(2), with respect to any employee who is so convicted:
 - 1. Take appropriate personnel action against such an employee, up to and including termination; or
 - 2. Require such employee to participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, Local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

The Contractor shall insert in the space provided below the site(s) for the performance of work done in connection with the specific Contract.

Place of Performance (street address, city, state, zip code and county)

Street Address _____

City, State, ZIP Code _____

County _____

Signature of Certifying Official

Date

CareerSource Citrus Levy Marion is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. All voice telephone numbers listed above may be reached by persons using TTY/TDD equipment via the Florida Relay Service at 711. If you need accommodations, please call 352-840-5700, ext. 7878 or e-mail <u>accommodations@careersourceclm.com</u> at least three business days in advance. Additionally, program information may be made available in Spanish upon request. A proud partner of the American Job Center network.

SWORN STATEMENT UNDER SECTION 287/133(3)(A), FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES

b be signed in the presence of a notary public or other officer authorized to minister oaths.)
ATE OF
OUNTY OF
Before me, the undersigned authority, personally appeared , who, being by me first duly sworn, made
e following statement:
1. The business address of (Contractor)
is
2. My relationship to (Contractor)
isis

(relationship such as sole proprietor, partner, president, vice-president).

3. I understand a public entity crime as defined in Section 287.133 of the Florida Statutes includes a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity in Florida or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or Contract for goods or services to be provided to any public entity or such an agency or political subdivision and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.

4. I understand "convicted" or "conviction" is defined by the statute to mean a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.

5. I understand "affiliate" is defined by the statute to mean (1) a predecessor or successor of a person or a corporation convicted of a public-entity crime, or a person or a corporation convicted of a public entity crime, or (2) an entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime, or (3) those officers, directors, executives, partners, shareholders, employees, members and agents who are active in the management of an

affiliate, or (4) a person or corporation who knowingly entered into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months.

6. Neither the Contractor nor any officer, director, executive, partner, shareholder, employee, member or agent who is active in the management of the Contractor nor any affiliate of the Contractor has been convicted of a public entity crime subsequent to July 1, 1992.

(Draw a line through paragraph 6 if paragraph 7 below applies.)

7. There has been a conviction of a public entity crime by the Contractor, or an officer, director, executive, partner, shareholder, employee, member or agent of the Contractor who is active in the management of the Contractor or an affiliate of the Contractor. A determination has been made pursuant to Section 287.133(3) by order of the Division of Administrative Hearings that it is not in the public interest for the name of the convicted person or affiliate to appear on the convicted vender list. The name of the order of the Division of Administrative Hearings is attached to this statement.

(Draw a line through paragraph 7 if paragraph 6 above applies.)

(affix seal)

Signature/Date

Sworn to and subscribed before me in the state and county first

mentioned above on the _____ day of _____, 200_____,

Notary Public

Notary Public Printed Name

List Of Current Centers And Participating Partners

	Lecanto	Chiefland	Ocala (14th Street)
WIOA Adult and Dislocated Worker Programs	x	x	x
Migrant and Seasonal Farm Worker Programs	referral	referral	referral
Indian and Native American Programs	referral	referral	referral
Job Corps	referral	referral	referral
Youth Services	×	x	x
Wagner-Peyser Programs	×	x	x
Adult Education	referral	referral	referral
Post-secondary Vocational Education	referral	referral	referral
Vocational Rehabilitation	referral	referral	referral
Older Worker Programs	referral	referral	x
Trade Adjustment Assistance	referral	referral	x
Veterans Employment and Training Programs	×	×	×
Community Service Block Grant Activities	referral	referral	referral
Employment and Training Activities carried out by the Department of Housing and Urban Development	referral	referral	referral
Re-employment Insurance Programs	×	x	x
Food Stamp Employment and Training	×	×	x
Supportive Service-Child and Transportation	x	x	×
Employer Services - OJT; CWEX; WOTC; Employed Worker etc.	x	x	x
Welfare Transition	×	×	x
Staffing Services	referral	referral	referral

Program Planning Summary Directions

Program Name: Enter the name of the program. If you are responding with more than one program or more than one location, please complete this form for each program and/or location.

Carry-in prior period Column: Using the number of current enrollments listed in the ITN, complete this column for the age youth that you serve.

Quarter Ending Columns: For each quarter enter the numbers that your program plans to serve.

Intakes: Enter the number of youth the program plans to enroll in this quarter.

Exits: Enter the number of youth the program plans to exit in this quarter.

Active Enrollments: Add the total of intakes, subtract the number of exits, and add any cumulative youth enrollments from the prior period.

Planned Performance Outcomes

Enter your planned performance outcomes for the program. Refer to the WIOA Indicators of Performance as previously noted in the ITN. Listed are the five required federal measures for youth served with WIOA funds. Additional space is available for other measures if wanted.

Program Name: _____

Participant	Carry-	Quarter	Quarter	Quarter
Information	in prior	Ending:	Ending:	Ending:
	period	9/30/25	12/31/25	03/31/26
In				
School				
Youth				
Intakes				
Exits				
Active				
Enrollments				
Out of				
School				
Youth				
Intakes				
Exits				
Active				
Enrollments				
Total Youth				
Intakes				
Exits				
Active				
Enrollments				

Enrollment Information

Planned WIOA Indicators of Performance

Outcomes	Quarter	Quarter	Quarter	Quarter
Outcomes				
	Ending:	Ending:	Ending	Ending:
	9/30/25	12/31/25	3/31/26	06/30/26
Credential				
Attainment				
Rate				
Measurable				
Skills Gain				
Employed 2 nd				
Quarter after				
Exit				
-				
Median Wage				
2 nd Quarter				
After Exit				
Employed 4 th				
Quarter After				
Exit				
Others				
Specify				
Specify				

Youth Program ITN Budget and Instructions

ITN Budget Form Instructions

I. Funds Requested: Funds being requested in the proposal.

Category: The cost line items.

- Staff Positions: List the title of all staff positions funded by the grant.
- Fringe: List the fringe benefits provided to the staff and overall percentage of each benefit as it relates to the employees hourly rate/salary.
- Other Costs: If not included in the following list, please describe.
- Direct participant costs
- Rent: Cost of space for the program.
- Supplies: Cost of office supplies and materials.
- Travel: Cost of staff travel
- Communications: Postage, telephone, and Internet costs.
- Equipment: Note that staff computers will be provided by CSCLM

Support Services:

Include all costs that you project to be paid on behalf of the participant. This will include transportation, clothing, tuition, books, fees, incentives and wages paid to the participant. This amount will be used for planning purposes.

Youth Program ITN Budget

Organization's Name:

Program Name:

I. Funds Requested

Category	Basis	Total Amount
Staff Positions		
Fringes (Describe)		
Direct Participant		
Other Costs		
(Describe)		
Rent		
Supplies		
Travel		
Communications		
Equipment		
Youth Supportive Services Costs		
(Describe)		
Project amount needed		
	Total	

Organization's Name: ______
Program Name: ______

II. In-Kind Funds

Description	Source	Amount
	Total	

Staff Job Titles and Salary Ranges

STAFF JOB TITLES AND SALARY RANGES

#	SALARY RANGES

*May duplicate if necessary

Review/Scoring Matrix



Youth Program Provider ITN

Scoring Matrix

	Reviewer	Respondent		
	NAME:	NAME:		
Scorir	ng: Read each qualifier below and rate the above res A score of 1 is the lowest with 10 be		scale of 1-10.	
1.)	Rate how well the respondent's proposal addresse requested elements contained in the Invitation to			
2.)	Rate the respondent's overall experience providing in the workforce system based on their proposal	g Youth services		
3.)	Rate the respondent's experience with all aspects to include work based training such as work exper			
4.)	Rate the respondent's organizational and staff qua	lifications		
5.)	Rate the respondent's proposed level of staffing a structure as it relates to the overall proposed delive work plan	-		
6.)	Rate the respondent's demonstrated ability to ope The scope of a cost reimbursement contract (finar	•		
7.)	Rate the respondents quantifiable performance hi Youth services (state performance reports, Florida Measures reports, etc.)	, .		
8.)	Rate how well the proposed scope of work aligns of services in Part III of the ITN (Program Parameters of Services Sought)		b	
9.)	Rate how well the proposed work plan addresses of fourteen (14) Required elements of all Youth prog (WIOA Section 129 (c) (1) (A) through (N))			
10.)	Rate the respondents overall demonstrated knowl Innovation and Opportunity Act (WIOA)	edge of the Workforce		
			Overall Score	