

**ATTACHMENT Q
PROPOSAL VERIFICATION FORM**

By completing and submitting this form with your Proposal, the Respondent is ensuring the proposal submission is in accordance with the mandatories and requirements outlined in RFP #10720. Also, please check the Vendor Bid System (VBS) for any addendums posted that indicate any **revised** document(s) for which the Respondent is responsible for completing and submitting by the date and time noted in the Calendar of Events (Attachment B, Section IV., A.) of this RFP.

Instructions: Place a check mark (√) in the box next to the **Requirement** indicating it has been completed and is ready to submit by the date and time specified in the Calendar of Events (Attachment B, Section IV., A.) of this RFP. **This form shall be submitted as the first document under Volume 1.**

Place a checkmark (√) in the boxes next to the tasks associated with your submission.

Electronic Upload Proposal	
<input type="checkbox"/>	Register for a DJJ Bid Library Account through the Procurement Manager. Respondents must register their email address for access to the DJJ Bid Library using a Microsoft account. For specific instructions, reference Attachment B, Section VI., Solicitation Information, and/or contact your Procurement Manager listed in the RFP.
<input type="checkbox"/>	If your organization does not use a Microsoft account, a free account can be created through Microsoft at https://www.office.com . This step must be completed first, prior to submitting the DJJ Bid Library registration request. The email address used to create the Microsoft account should be utilized in the registration request to the Procurement Manager.
<input type="checkbox"/>	The complete Notice of Intent to Submit a Proposal (Attachment N) shall be uploaded to the DJJ Bid Library no later than the deadline specified in the Calendar of Events, Attachment B, section IV., A., of this RFP. In the event a Respondent needs technical assistance, the DJJ Bid Library Technical Assistant is Bryant Wombles, who can be reached via e-mail at: William.Wombles@djj.state.fl.us or phone (850) 717-2606. The submittal of this form is a requirement for this RFP.
<input type="checkbox"/>	Electronic proposals shall be uploaded to the DJJ Bid Library no later than the due date and time specified in the Calendar of Events for this RFP. Any and all documents uploaded, edited, or modified in any way after this date and time will be deemed non-responsive.
<input type="checkbox"/>	The complete proposal, which contains Volumes 1 and 2, and 3, shall be saved in Microsoft Word and/or Excel. The signed Transmittal Letter (Volume 1, Tab 1), the signed Attachment Q, Proposal Verification form (Volume 1, Tab 1), the Financial Viability documentation (Volume 2, Tab 3), are the only documents which may be saved in a PDF format. The Attachment H - Budget (Volume 2, Tab 2) must be submitted in Excel.

MANDATORY REQUIREMENT (Attachment B, V.)	
<input type="checkbox"/>	It is MANDATORY that the Respondent submit its complete proposal within the time frame specified in the Calendar of Events (Attachment B, Section IV., A.). A proposal is considered complete if it contains all of the required documents listed in the Attachment B, Section XX.

TECHNICAL PROPOSAL – VOLUME 1	
<input type="checkbox"/>	Transmittal letter is on Respondent’s letterhead.
<input type="checkbox"/>	Transmittal letter denotes and is signed by an individual authorized to bind the Respondent.
<input type="checkbox"/>	Transmittal letter has the following: <ul style="list-style-type: none"> <input type="checkbox"/> official company name; <input type="checkbox"/> company address; <input type="checkbox"/> telephone number; <input type="checkbox"/> fax number; <input type="checkbox"/> email address; <input type="checkbox"/> name and title of the Respondent official who will sign any contract;

<input type="checkbox"/>	Federal Employee Identification #, including the Florida Vendor Sequence #, if available, and if not available, a statement saying so.
<input type="checkbox"/>	DUNS #, if applicable, and if not applicable, a statement saying so.
<input type="checkbox"/>	If entity is "DBA" or "Doing Business As", the Respondent shall state the reason for it.
<input type="checkbox"/>	The transmittal letter must contain the following exact statement: "On behalf of (insert Respondent's name), this letter certifies that the (insert Respondent's name) agrees to all terms and conditions contained in the Request for Proposal for which this proposal is submitted."
<input type="checkbox"/>	The transmittal letter must contain this exact statement: "On behalf of (insert Respondent's name), this letter certifies that (insert Respondent's name) has met all conditions and requirements of Attachment A, including that neither it nor its principals are presently debarred, suspended, or proposed for debarment, or have been declared ineligible or voluntarily excluded from participation in this Procurement/contract by any federal department or agency." If the Respondent is unable to certify any part of this statement, such Respondent shall include an explanation in the Transmittal Letter.
<input type="checkbox"/>	The transmittal letter must contain this exact statement: "On behalf of (insert Respondent's name), this letter certifies that neither (insert Respondent's name) nor anyone acting on its behalf have contacted, between the release of the solicitation and the end of the seventy-two (72) hour period following the agency posting the notice of intended award, excluding Saturdays, Sundays, and state holidays, any employee or officer of the executive or legislative branch concerning any aspect of this solicitation, except in writing to the Procurement Manager or as provided in the solicitation documents."
<input type="checkbox"/>	The transmittal letter must contain this exact statement: "On behalf of (insert Respondent's name), this letter certifies that (insert Respondent's name) is not listed on the Scrutinized Companies that Boycott Israel List, or is engaged in a boycott of Israel; the Scrutinized Companies with Activities in Sudan List; the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; has been engaged in business operations in Syria; or engaged in business operations with the government of Venezuela (pursuant to F.S. 215.472, 215.4725, 215.473, and 287.135)".
<input type="checkbox"/>	The Respondent shall insert the Transmittal Letter in Volume 1, Tab 1, after the Proposal Verification Form.
<input type="checkbox"/>	Cross Reference Table – Volume 1, Tab 1 In order to assist the Respondent in its development of a responsive proposal and to facilitate proposal evaluation by the Department, the Respondent shall provide a table that cross-references the contents of its proposal with the contents of the RFP. Please see the Attachment O to this RFP for the cross-reference table. The Respondent shall insert the Attachment O in Volume 1, Tab 1, after the Part A - Transmittal Letter. Remember to complete the Attachment O in its entirety.
<input type="checkbox"/>	Drug-Free Workplace Certification & Tie Breaking Certifications – Volume 1, Tab 2 The proposal may contain the Drug-Free Workplace Certification in accordance with section 287.087, F.S. (if desired by the Respondent) for preference in the event of a tie in the scoring of a competitive solicitation. This is not a mandatory requirement. The form is labeled as Attachment K. The Respondent may also submit the Attachment S (Tie Breaking Certifications), which is not mandatory.

<input type="checkbox"/>	<p>Technical Proposal – Volume 1, Tab 3</p> <p>The Technical Response (described below) shall be prepared in the format listed below utilizing 8.5" x 11" paper with one-inch margins (top, bottom, and sides). Each Respondent shall limit the Technical Proposal's narrative to no more than sixty (60) consecutive pages. Pages submitted in excess of the specified limit for the Technical Proposal's narrative will be removed prior to evaluation and will not be evaluated. Any attachments, charts, photos, maps, diagrams, or other resource materials that support the information provided in the Technical Proposal shall be referenced within the Technical Proposal's narrative, included as exhibits or attachments to the Technical Proposal, and presented at the end of the Technical Proposal. Such exhibits or attachments shall not be counted in the sixty (60) page limitation established for the Technical Proposal. The Technical Proposal package shall contain the following sections in the following sequence (PLEASE NOTE THAT IT IS INSUFFICIENT FOR PROPOSALS TO MERELY RECITE OR REITERATE THE SERVICES TO BE SOUGHT):</p>
<input type="checkbox"/>	<p>Management Competencies and Capabilities</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the proposal describe the Respondent's company's management capability to manage/control the program? <input type="checkbox"/> Does the proposal describe the Respondent's organizational structure and provide an organizational chart and leadership staff qualifications that indicate sufficient qualified staff to perform the services required by the RFP? <input type="checkbox"/> Does the proposal describe the Respondent's corporate oversight and support to provide adequate oversight to each center? <input type="checkbox"/> Does the proposal describe the Respondent's proposed program's internal quality improvement process, which is utilized to identify problems and improve processes with the center? <input type="checkbox"/> Does the proposal describe the Respondent's capabilities to meet the requirements of Attachment B, Section XVI., Options? Did the Respondent define its capacity to respond to changes in Contract services?
<input type="checkbox"/>	<p>Implementation Plan/Timeline</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the proposal provide a detailed plan of implementation for services to be provided for the duration of the funding period? <input type="checkbox"/> Does the proposal provide a detailed timeframe of all proposed activities (including anticipated dates of start and completion) of Medical and Mental Health Services and deliverables listed in Attachment A, Section III., Services to be Provided?
<input type="checkbox"/>	<p>Staffing/Professional Qualifications</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the proposal outline the staffing and personnel structure? <input type="checkbox"/> Does the proposal identify the number and type of staff to perform Medical and Mental Health Services required management staff positions, and key personnel that are required for the resulting Contract? <input type="checkbox"/> Does the proposal describe professional qualifications and licensure of all management personnel and key personnel listed in the Staffing Levels section for all professional staff proposed, and current up to date registrations? If staff have not been determined/hired upon proposal submission, did the Respondent provide a statement that the professional staff's license and State of Florida, Department of Health registration will be to the Department's Contract Manager prior to start of services? <input type="checkbox"/> Does the proposal describe training required for staff to perform Medical and Mental Health Services required under the RFP?
<input type="checkbox"/>	<p>Comprehensive Health and Medical Services</p> <ul style="list-style-type: none"> <input type="checkbox"/> How well does the proposal describe the Respondent's approach to providing the Comprehensive Health and Medical Services required by this RFP? <input type="checkbox"/> Does the Respondent explicitly address all Department requirements specified in Attachment A-1? <input type="checkbox"/> Does the proposal demonstrate the Respondent's understanding of the major specific service tasks that must be carried out to deliver Comprehensive Health and Medical Services as specified in the RFP and the Department's Rule? <input type="checkbox"/> Does the proposal describe, in detail, the requirements of delivering the specific Medical and Mental Health Services tasks and/or sub-tasks that fall under each major task?

<input type="checkbox"/>	<p>Mental Health and Substance Abuse Services</p> <ul style="list-style-type: none"> <input type="checkbox"/> How well does the proposal describe the Respondent's approach to providing the Mental Health and Substance Abuse Services required by this RFP? <input type="checkbox"/> Does the Respondent explicitly address all Department requirements specified in Attachment A-2? <input type="checkbox"/> Does the proposal demonstrate the Respondent's understanding of the major specific service tasks that must be carried out to deliver Mental Health and Substance Abuse Services as specified in the RFP and the Department's Rule? <input type="checkbox"/> Does the proposal describe, in detail, the requirements of delivering the specific Mental Health and Substance Abuse Services tasks and/or sub-tasks that fall under each major task?
<input type="checkbox"/>	<p>Psychiatric Services</p> <ul style="list-style-type: none"> <input type="checkbox"/> How well does the proposal describe the Respondent's approach to providing the Psychiatric Services required by this RFP? <input type="checkbox"/> Does the Respondent explicitly address all Department requirements specified in Attachment A-3? <input type="checkbox"/> Does the proposal demonstrate the Respondent's understanding of the major specific service tasks that must be carried out to deliver Psychiatric Services as specified in the RFP and the Department's Rule? <input type="checkbox"/> Does the proposal describe, in detail, the requirements of delivering the specific Psychiatric Services tasks and/or sub-tasks that fall under each major task?
<input type="checkbox"/>	<p>Telehealth Services</p> <ul style="list-style-type: none"> <input type="checkbox"/> How well does the proposal describe the Respondent's approach to providing the Telehealth Services required by this RFP? <input type="checkbox"/> Does the Respondent explicitly address all Department requirements and outlines the staffing and personnel structure for Telehealth Services as specified in Attachment A, Section III., A., 10, Attachment A-1 and Attachment A-3? <input type="checkbox"/> Does this section identify the number and type of staff to perform Telehealth Services, required management staff positions, and key personnel that are required for the resulting Contract? Does this section demonstrate the Respondent's understanding of the major specific service tasks that must be carried out to deliver Telehealth Services as specified in the RFP and Department's Rule?

FINANCIAL PROPOSAL – VOLUME 2	
<input type="checkbox"/>	<p>Budget – Volume 2, Tab 1</p> <ul style="list-style-type: none"> a. The Respondent shall complete and submit the Attachment H - Budget b. The Attachment H must reflect proposed costs which are allowable, reasonable, and necessary to provide the proposed services. c. Once the Department has accepted the Attachment H, the Attachment H shall not be altered without prior written approval from the Department. d. Any projected cost not captured in the Attachment H will be the responsibility of the awarded Provider.
<input type="checkbox"/>	<p>Certified Minority Business (CMBE) Subcontracting Utilization Plan – Volume 2, Tab 2</p> <p>The Respondent shall describe its plan and/or methods to encourage diversity and utilize minority businesses in the performance of the services described in this solicitation. The information provided in this section shall address the plan described in the CMBE Subcontracting Utilization Plan of the RFP. The Respondent shall also include documentation supporting the CMBE Subcontracting Utilization Plan, for each Florida CMBE listed that the Respondent intends to utilize in the program procured. Florida CMBEs must meet all CMBE eligibility criteria and be certified as a CMBE by the Office of Supplier Diversity (OSD) of the Florida Department of Management Services. The documentation shall be a one-page letter supplied by the CMBE on its letterhead stationery, stating the intent of the CMBE to participate in the program and clearly identifying the Department Solicitation Number. No points will be awarded for the CMBE Subcontracting Utilization Plan.</p>

PROVIDER PERFORMANCE – VOLUME 3	
<input type="checkbox"/>	<p>Certification of Experience– Volume 3, Tab 1</p> <p>It is required that the Respondent sign and submit a complete Attachment R (Certification of Experience). The Respondent must demonstrate two years of experience within the last five years of providing evaluations or professional clinical services to at-risk and/or delinquent youth.</p>
<input type="checkbox"/>	<p>Client Contact List – Volume 3, Tab 2</p> <p>It is required that the Respondent submit an Attachment T (Client Contact List) with a minimum of three references. This list is required in order for the proposal to be complete.</p> <ol style="list-style-type: none"> a. The Attachment T must be completed and submitted with a minimum of three previous or current clients for whom the Respondent has provided evaluations or professional clinical services to at-risk and/or delinquent youth as described in Attachment A. b. The Department reserves the right to contact any and all references in the course of this solicitation and make a fitness determination, not subject to review or challenge. c. The Department shall not provide a reference. If the Respondent has only provided these same or similar services to the Department, the Respondent is to include an attestation statement from the individual with authority to bind the Respondent in place of the Attachment T. d. No faxes will be accepted for Attachment T. Only copies submitted electronically through the DJJ Bid Library are acceptable.

By my signature below, I am verifying the Proposal being submitted is in accordance with the instructions in this Solicitation.

Company: _____

Verified by: _____ **Date:** _____

Print Name: _____