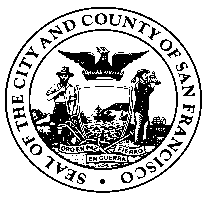
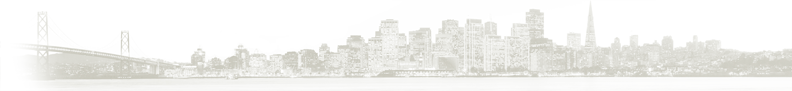
# 

**Application: Request for Proposals 203**

**City and County of San Francisco**

Office of Economic and Workforce Development



|  |
| --- |
| **APPLICATION DETAILS AND INSTRUCTIONS** |
| **Brevity** There are character counts for narrative responses as a way to help you write informative, yet concise answers.  **Style Guide** To adhere to the character counts for each of the answers, consider using high-level, bullet-point style information about your organization and programs. You are welcome to use any commonly accepted abbreviations when responding to questions, unless instructed otherwise.  **Other Helpful Tips**   * Be sure your email address is correct so that you will receive submission confirmations and RFP notices. * You may type directly into the form below or copy and paste answers from another document. Note that pasting from a word processing program into appropriate narrative fields will work, but formatting may need to be adjusted. If you subsequently convert or save this form as PDF prior to submission, formatting such as bullets, numbering, icons, images, etc. may be lost.   **Submitting** When you are satisfied with your application, save your final version and email it to:    [**oewd.procurement@sfgov.org**](mailto:oewd.procurement@sfgov.org)  You will receive an automated response to indicate that your submission was received. You will be responsible for ensuring that all required questions have been addressed and that all supplemental materials have been submitted on or before the deadline. The receive date and time will be established by the date/time assigned by the City email server. Early submission is highly encouraged.  You may alternatively hand-deliver one signed original application and all supplemental materials, along with a CD or USB drive with electronic versions of the application and all supplemental materials , to:   |  | | --- | | **Office of Economic and Workforce Development (OEWD)**  **San Francisco City Hall**  **1 Dr. Carlton B. Goodlett Place, Room 448**  **San Francisco, CA 94102**  **Attn: Myisha Hervey** |   If you need to cancel and resubmit your application, please resubmit an *entire package with a replacement application and all supplemental materials*. In the body of the email (or on a coversheet within the envelope of the new submission), please reference the original application, including submission date, time, and originating email address or drop off person. All submissions, original or replacement, must be received by the deadline stated in the RFP. No late submissions will be considered.  **Due Date**  Applications will be accepted until **5 P.M.PST on Friday September 30, 2016.**  **Questions** If you have any questions when completing this application, please email [oewd.procurement@sfgov.org](mailto:oewd.procurement@sfgov.org) by  **12:00 noon PST** **Thursday September 15, 2016**. A list of substantive questions and answers will be posted to the OEWD website (link below) for review by all interested parties by 5 P.M. Monday September 19, 2016. Questions of a technical nature concerning the application, forms, or website may continue to be addressed until the application due date. See RFP for full terms, conditions, and instructions. All materials related to this RFP are available at <http://oewd.org/bid-opportunities/RFP-203> |

|  |  |
| --- | --- |
| **PART I. LEAD APPLICANT PROFILE**  This section should include information for the Lead Applicant. The Lead Applicant is the entity that will hold the contractual obligation for the proposed project. If you are applying as the fiscal agent for another entity, please include your information here and list information on the Program Lead in the next section. All fields marked by an asterisk (\*) are mandatory; enter 0 or N/A if not applicable. | |
| **Lead Applicant Name\*** *(75 characters)* *e.g. Name as shown on your 501(c)(3), 501(c)(4), or 501(c)(6) letter and to whom contributions are payable* | [Lead Applicant Name] |
| **Doing Business As (DBA) or Also Known As (AKA), if applicable** *(50 characters)* | [DBA or AKA - limit 50 characters] |
| **Address\*** *Headquarters Street Address with Suite #, if needed* | [Street Address]  [City], [State] [Zip] |
| **Web Address\*** | [Website] |
| **Main Phone including area code\*** |  |
| **Executive Director/CEO Name\*** | [ED/CEO Name] |
| **Executive Director/CEO Title\*** | [ED/CEO Title] |
| **Executive Director/CEO Direct Phone\*** | [ED/CEO Phone] |
| **Executive Director/CEO Email\*** | [ED/CEO Email] |
| **City and County of San Francisco Vendor Number\*** | [123456] or  Not a current City vendor |
| **Type of Entity** | Nonprofit  For-profit |

|  |  |
| --- | --- |
| **CONTACT & GENERAL INFORMATION: PROGRAM LEAD** This section only applies if the Lead Applicant is acting solely as the Fiscal Agent. | |
| **Program Lead** | [Program Lead Name] |
| **Program Lead Address** *Local Headquarters Street Address with Suite #, if needed* | [Street Address]  [City], [State] [Zip] |
| **Web Address** | [Website] |
| **Main Phone including area code** | [Main Phone] |
| **Program Lead Executive Director/CEO Name\*** | [ED/CEO Name] |
| **Program Lead Executive Director/CEO Direct Phone\*** | [ED/CEO Direct Phone] |
| **Program Lead Executive Director/CEO Email\*** | [ED/CEO Email] |
| **City and County of San Francisco Vendor Number\*** | 123456 or  Not a current City vendor |
| **Type of Entity** | Nonprofit  For-profit |

|  |  |  |
| --- | --- | --- |
| **POINT OF CONTACT FOR THIS APPLICATION** If another individual will serve as the primary point of contact for this application, please list their contact information here. This person should be authorized to clarify programmatic and budgetary questions on behalf of the Lead Applicant. | | |
| **Primary Point of Contact Name\*** | [Contact Name] | |
| **Primary Point of Contact Title\*** | [Contact Title] | |
| **Primary Point of Contact Direct Phone\*** | [Contact Phone] | |
| **Primary Point of Contact Email\*** | [Contact Email] | |
|  |  | |
| **OTHER PROGRAM AGENCIES** If this application includes other agencies as partners, subgrantees or advisors, please list them below. | | |
| [Agency Name] | | Suggested Relationship |
| [Agency Name] | | Suggested Relationship |
| [Agency Name] | | Suggested Relationship |
| [Agency Name] | | Suggested Relationship |
| [Agency Name] | | Suggested Relationship |
|  | |  |
| **TOTAL AGENCY BUDGET (7/1/2015-6/30/2016)** \*Note: Please remember to include detailed budget(s) as supplemental materials. | | |
| **Lead Applicant Total Budget\*  $[Lead Applicant Budget]** | | **Program Lead Total Budget (if applicable)  $[Program Lead Budget]** |

|  |
| --- |
| **PROGRAM AREA FOR THIS APPLICATION**  From the dropdown list below, please choose the program area for this proposal. Proposers may seek funding in more than one area described below, however, a separate application must be filed for each funding area that the organization wishes to provide services for. |
| Select a Program Area. |

|  |
| --- |
| **PART II. PROJECT DESCRIPTION**  The project description (proposal) provides information on which the application will be evaluated and ranked in competition with other applications for funds available through this RFP. It should be concise and complete. In preparing the project description, applicants should provide information responsive to pertinent requirements set forth in the scope of work. Pay particular attention to and address in full; minimum qualifications, specific questions, and other items detailed in each program area. Project descriptions are evaluated based on clarity, substance and measurable results, not length. |
| **Applicant Qualifications and Staff Assignments** (30 points)  This section should briefly address the principal objectives of the proposed project, and establish the applicant’s professional qualifications and the experience of proposed partners, sub-contractors and staff. The applicant should detail past experience and track record implementing projects similar to the proposed activities. The applicant should provide an overview of staff assignments, details may include how staff will be accessible and available to individuals and/or organizations receiving services, the relevant experience of staff members, and the distribution of workload within the project team. This section should further note how the project team demonstrates a thorough understanding of the economic, social, financial, institutional or other issues that require a solution as well as indicators of community support. |
| [Overview - limit 4000 characters] |
| **Approach, Activities and Outcomes** (40 points)  This section should outline a plan of action that describes in sufficient detail the specific scope of services applicant(s) propose and how the proposed work will be accomplished. The plan should address all functions and activities for which applicants seek funds. Cite factors that might accelerate or decelerate work, explain rationales for strategies selected, and describe any unique or unusual features of the proposed project, such as design or technological innovations, cost or time saving strategies, or methods to increase engagement of targeted stakeholders in services.  **Specific recommendations:**   * For Program Areas with specific questions please address them in this section, unless otherwise noted. * Describe the services to be provided. For each service component provide detail on the types of activities, number of hours, frequency, location and methods that will be used to deliver services as appropriate. * Address the qualitative and quantitative outcomes your program proposes to achieve. Provide projections of the accomplishments to be achieved for each activity or function proposed, such as the number of activities or steps to be accomplished or number of individuals or businesses to be served. If accomplishments cannot be quantified, list them in chronological order to show a sequence of steps and their projected start and end dates. * Include and make clear the organizations, cooperating entities, consultants or key individuals who will work on the proposed activities, with a short description of the nature of their contributions and qualifications. * Address demographic and geographical areas of focus where appropriate, or as required by program section above. * Provide specific details regarding your past performance as a provider of similar services including any current and/or on-going grants or contracts with the City of San Francisco or other funders. |
| [Approach, Activities and Outcomes - limit 10,000 characters] |

|  |
| --- |
| **Performance Measurement and Reporting** (15 points)  Provide a narrative addressing how data on project activities and outcomes will be collected and reported. Describe measures that will be developed and/or used to determine the extent to which the project has achieved its stated objectives and describe how data will be used to determine whether the needs identified are being met and whether project results are being achieved. Describe any processes and procedures that are or will be in place to determine whether the project is being conducted in a manner consistent with the work plan and how effectiveness and efficiency will be improved. Describe how the outcomes proposed and measured will demonstrate positive neighborhood development impact. |
| [Performance Management and Reporting - limit 4000 characters] |
| **Financial Management and Budget** (15 points)  Please provide a brief narrative detailing the financial management of the organization  Specific recommendations:   * Describe the key features of your organization’s financial tracking system and confirm it is capable of generating all financial information needed for required reports, including data needed to monitor, evaluate and if necessary, modify program performance. * Describe in detail any cost allocation plan utilized when costs are chargeable to more than one cost category, or to more than one program and/or funding source. * If proposing a management fee/fiscal fee identify how the requested percentage was identified. * Provide a narrative justification for items in the budget * Provide details on any matching or leveraged funds including anticipated source, amount, and restrictions. Although encouraged for all requests, matching funds may be required by some program areas. Please refer to the program descriptions in Section II of the RFP to determine if a match is required. * Provide a proposed budget for the project using the template available on the OEWD bid opportunities website at <http://oewd.org/bid-opportunities/RFP-203> * If applying to provide Nonprofit Support Program services (areas CC, DD, and EE); provide details on how the proposed budget meets (or is under) the targets identified in the RFP. This may include identifying and explaining particular percentages of line items presented in the budget template that would be dedicated to technical assistance vs those dedicated to administration or other services. |
| [Financial Management and Budget - limit 4000 characters] |

|  |  |
| --- | --- |
| **SUPPLEMENTAL MATERIALS CHECKLIST** | |
| All required appendix templates are available for download at: <http://oewd.org/bid-opportunities/RFP-203> . All documents below must be submitted along with your complete application unless otherwise noted. If you are unable to provide a mandatory supplemental document for any reason, submit a statement in its place explaining why the information is not available.  **Applications and all supplemental materials are due no later than 5:00pm PST on Friday, September 30, 2016**. Please check the boxes under “Submission Method” to confirm whether you are sending the attachment via email or in hardcopy. Email submissions must be sent to: [**oewd.procurement@sfgov.org**](mailto:oewd.procurement@sfgov.org) **.** Please make sure to reference your agency name and “RFP 203” in the subject line. Alternative submissions may be accepted (see the Proposal Submission Requirements in the RFP for details). | |
| **Supplemental Materials** | **Submission Method** |
| **Appendix A: Sample Agreement for Grant (Form G-100)**  Note that terms and conditions within the City’s standard grant boilerplate may change as new legislation is enacted or to reflect specific regulations and requirements of the moneys funding the grant’s programming. The template available for download at <http://oewd.org/bid-opportunities/RFP-203> should only be used as a general guide. | *Not required: for review only.* |
| **Appendix B: Proposal Budget** **Template** Include a budget for your proposed project activities using the Excel template provided. No other budget formats will be accepted. | Email  Hardcopy |
| **Appendix C: Proposal Application for RFP 203**  Please be sure to fill out all required fields in this application. | Email  Hardcopy |
| **Appendix D: Staffing and Board Composition Chart**  Submit staffing/board information for the Lead Applicant and Program Lead, if applicable. | Email  Hardcopy |
| **Appendix E: Submission Authorization from Executive Director/Chief Executive Officer**  This form must be signed by the Lead Applicant Executive Director or Chief Executive Officer and the Program Lead Executive Director or Chief Executive Officer, if applicable. | Email  Hardcopy |
| **Appendix F: Table of Client Activities and Outcomes**  If applying to provide Nonprofit Support Program services (areas DD, EE, and FF); provide a completed Appendix F detailing the client activities and outcomes for the appropriate area. If not applying for program sections CC, DD, or EE, please check “N/A.” | Email  Hardcopy  N/A |
| **Organizational Budget**  Please include an overall organizational budget for the Lead Applicant and the Program Lead, if applicable. (no specific template provided) | Email  Hardcopy |
| **Organizational Chart**  Please include an organizational chart for the Lead Applicant and Program Lead, if applicable. (no specific template provided) | Email  Hardcopy |
| **Letters of Support**  Please include letters of support (maximum of 4) if indicated in the program area as a requirement. Letters of support are encouraged for all areas, however, if the program area does not require that you demonstrate support from other entities, agencies or communities, and you do not wish to provide letters of support, please check “N/A”. | Email  Hardcopy  N/A |