

1. What is the expected funding level for the One-Stop Operations?
Funding each year is determined by several factors including State level WIOA Allocations. As an example for the Program Year, 2020 Alabama received an overall 7% reduction in WIOA allocations. The budget for WIOA Title 1 Operations for PY20 was reduced to just over \$1,100,000. One-Stop Operator costs should not exceed 10% of Title 1 costs
2. What is the expected funding level for WIOA Adult & Dislocated Worker services?
Based on PY20 Funding Level, approximately \$3,400,000 of total funding went to Adult and Dislocated Worker Services.
3. What is the expected funding level for WIOA Youth services?
Based on PY20 Funding Level, approximately \$1,100,000 of total funding went to Youth Programs.
4. Who is the current provider(s) of these services?
Alabama Department of Labor
5. Is the current provider(s) meeting performance?
Yes
6. What is the current staffing plan for the One-Stop Operator?
The current provider, the Alabama Department of Labor provide One-Stop Operator Services as an in-kind contribution.
7. What is the current staffing plan for the WIOA Adult & Dislocated Worker Provider?
Staffing is not designated by funding stream; it is based on Full-time Equivalencies and based on average participants served.
8. What is the current staffing plan for the WIOA Youth Provider?
Staffing is based on the participants served.
9. What are the current salary ranges by position for this contract?
Salary ranges are set by the Alabama State Personnel Department based on staff position
10. Do respondents need to budget for facility costs at the Career Centers?
Yes
11. Are building leases held by the current provider(s)?
Yes
12. What are the projected carry-in participants for each county?

Contracted services are for all 10 counties served and last year 2200 individuals were served.

13. What are the prior year numbers served for Individualized Career Services?

A total of 1,183 individuals received Individualized Services

14. What is the ITA amount allowed for the region? How many were issued in the most recent program year? For PY20 Budget (Adults , DLW

In PY19 1,408 individuals received ITAs. Current anticipated ITA amounts are Adult - \$1,250,000; Dislocated Worker - \$200,000; Youth - \$100,000

15. Please provide the current number of businesses served by the Workforce Development Services provider.

43 businesses have received OJT services so far this program year.

16. In the last program year, how many individuals participated in work-based learning?

58 participants entered WBL for Region 6

17. For the most recent program year, what was the annual amount spent on supportive services by program area?

Supportive Services were not included in the budget for PY19

18. Describe how services are being provided currently in the COVID-19 environment. For example, are centers open to the public? Are there any virtual services available? Or a combination of in-person and virtual options?

Career Centers for Area 6 are currently open to the public despite being closed for a brief period during the initial surge of the COVID-19 pandemic. Currently, the Centers are following all Alabama Public Health Guidelines and in some cases are utilizing a combination of virtual and in-person services to assist the clients.

19. Please provide the caseload, by center/county and by funding streams, for the past fiscal year.

Contracted services are for all 10 counties served and last year 2200 individuals were served.

20. What assessment tools are staff currently using to assess functional education levels and aptitude and interests?

TABE testing is used to assess functional education levels and My Next Move on O*NET is used for interest and aptitude.

21. Do you currently have a system established for interagency referrals? If so, are you satisfied with the process?

All the Area 6 Career Centers have established procedures for interagency referrals and Area 6 and the respective Centers successfully completed One-Stop Certification. See also question 23

22. Do you currently have a customer satisfaction survey process? If so, is it electronic?
Please share the most recent results?

Yes, there is a pen and paper customer service process. For PY19, 801 customers responded to the survey with over 95% of the customers describing services as being exceptional or good.

23. Who are the mandated core partners co-located within each One-Stop location? WIOA

Title I Adult, DLW, Youth

Title II Adult Education and Literacy

Title III Alabama Community College System

Title IV Alabama Department of Rehabilitation Services

24. The revised RFP no longer includes the requirement of a Vendor Disclosure Statement. Please confirm this is correct or provide this form if necessary for proposal submission.

A copy of the Vendor Disclosure Form can be found on the following page.

25. RFP page 14 under Required Performance Measures states: "At a minimum, 25% of all WIOA eligible individuals who are not job-ready will be referred to WIOA sponsored training, Ready-to-Work programs, Manufacturing Skill Standards Council Certificate, or other comparable job training programs based on the individual's knowledge, skills, abilities, and employment goals." Please advise which participant groups this performance measure applies to (i.e., Adults, Dislocated Workers, and/or Youth).

This would apply to all three participant groups; Adults, Dislocated Workers, and Youth.

Vendor Disclosure Statement Information and Instructions

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000. The disclosure statement is not required for contracts for gas, water, and electric services where no competition exists, or where rates are fixed by law or ordinance. In circumstances where a contract is awarded by competitive bid, the disclosure statement shall be required only from the person receiving the contract and shall be submitted within ten (10) days of the award.

A copy of the disclosure statement shall be filed with the awarding entity and the Department of Examiners of Public Accounts and if it pertains to a state contract, a copy shall be submitted to the Contract Review Permanent Legislative Oversight Committee. The address for the Department of Examiners of Public Accounts is as follows: 50 N. Ripley Street, Room 3201, Montgomery, Alabama 36130-2101. If the disclosure statement is filed with a contract, the awarding entity should include a copy with the contract when it is presented to the Contract Review Permanent Legislative Oversight Committee.

The State of Alabama shall not enter into any contract or appropriate any public funds with any person who refuses to provide information required by Act 2001-955.

Pursuant to Act 2001-955, any person who knowingly provides misleading or incorrect information on the disclosure statement shall be subject to a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00. Also, the contract or grant shall be voidable by the awarding entity.

Definitions as Provided in Act 2001-955

Family Member of a Public Employee - The spouse or a dependent of the public employee.

Family Member of a Public Official - The spouse, a dependent, an adult child and his or her spouse, a parent, a spouse's parents, a sibling and his or her spouse, of the public official.

Family Relationship - A person has a family relationship with a public official or public employee if the person is a family member of the public official or public employee.

Person - An individual, firm, partnership, association, joint venture, cooperative, or corporation, or any other group or combination acting in concert.

Public Official and Public Employee - These terms shall have the same meanings ascribed to them in Sections 36-25-1(23) and 36-25-1(24), Code of Alabama 1975, (see below) except for the purposes of the disclosure requirements of this act, the terms shall only include persons in a position to influence the awarding of a grant or contract who are affiliated with the awarding entity. Notwithstanding the foregoing, these terms shall also include the Governor, Lieutenant Governor, members of the cabinet of the Governor, and members of the Legislature.

Section 36-25-1(23), Code of Alabama 1975, defines a public employee as any person employed at the state, county or municipal level of government or their instrumentalities, including governmental corporations and authorities, but excluding employees of hospitals or other health care corporations including contract employees of those hospitals or other health care corporations, who is paid in whole or in part from state, county, or municipal funds. For purposes of this chapter, a public employee does not include a person employed on a part-time basis whose employment is limited to providing professional services other than lobbying, the compensation for which constitutes less than 50 percent of the part-time employee's income.

Section 36-25-1(24), Code of Alabama 1975, defines a public official as any person elected to public office, whether or not that person has taken office, by the vote of the people at state, county, or municipal level of government or their instrumentalities, including governmental corporations, and any person appointed to a position at the state, county, or municipal level of government or their instrumentalities, including governmental corporations. For purposes of this chapter, a public official includes the chairs and vice-chairs or the equivalent offices of each state political party as defined in Section 17-16-2, Code of Alabama 1975.

Instructions

Complete all lines as indicated. If an item does not apply, denote N/A (not applicable). If you cannot include required information in the space provided, attach additional sheets as necessary.

The form must be signed, dated, and notarized prior to submission.



State of Alabama Disclosure Statement

(Required by Act 2001-955)

ENTITY COMPLETING FORM

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

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STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

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This form is provided with:

- Contract
 Proposal
 Request for Proposal
 Invitation to Bid
 Grant Proposal

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?

- Yes
 No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

STATE AGENCY/DEPARTMENT	TYPE OF GOODS/SERVICES	AMOUNT RECEIVED
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Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?

- Yes
 No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

STATE AGENCY/DEPARTMENT	DATE GRANT AWARDED	AMOUNT OF GRANT
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1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS	STATE DEPARTMENT/AGENCY
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2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE	STATE DEPARTMENT/ AGENCY WHERE EMPLOYED
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If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

NAME OF PAID CONSULTANT/LOBBYIST	ADDRESS
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By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature Date

Notary's Signature Date Date Notary Expires

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.