



**NEW YORK STATE OFFICE FOR THE AGING**

**REQUEST FOR APPLICATIONS**

**New York State Grantee Senior Community Service Employment  
Program (SCSEP) Regional Sub-Recipient Application**

**Date of Issuance – January 25, 2018**

**Andrew M. Cuomo  
Governor**

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Acting Director**

# New York State Grantee Senior Community Service Employment Program (SCSEP) Regional Sub-Recipient Application

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## IMPORTANT INFORMATION FOR PROSPECTIVE APPLICANTS

Through this Request for Applications (RFA) the New York State Office for the Aging (henceforth referred to as “NYSOFA” or the “State”) seeks applications from eligible organizations (henceforth referred to as “applicant”) to act as sub-recipients to administer the State Senior Community Service Employment Program (SCSEP) in one or more of the eight (8) designated regions outlined below. **An organization can apply to administer SCSEP in more than one region, however, a separate application will need to be submitted for each region for which it is applying.**

### *Background*

SCSEP is a community service and work-based training program for older workers authorized in Title V of the Older Americans Act and is administered by the United States Department of Labor Employment and Training Administration (USDOL/ETA). SCSEP is the only federally-sponsored employment and training program targeted specifically to low-income older individuals who are able to enter or reenter the workforce. The dual goals of the program are to promote useful opportunities in community service job training and to move SCSEP participants into unsubsidized employment.

### *Program Overview*

SCSEP provides subsidized, part-time, community service training for unemployed, low-income persons aged 55 or older who have poor employment prospects. Through this program, older workers have access to SCSEP services and employment assistance through American Job Centers (also known as One-Stops). Program participants work an average of 20 hours a week and are paid the highest of the federal, state, or local minimum wage. Program participants are not considered employees of NYSOFA, the sub-recipient, or the agency at which they are receiving training; but rather are considered trainees.

SCSEP participants are placed in a wide variety of community service assignments at non-profit and public entities, allowing these agencies to enhance and provide needed services and older workers to gain job skills. These community service training assignments promote self-sufficiency; provide assistance to organizations that benefit from increased civic engagement; and support communities. These assignments are intended to serve as a bridge to unsubsidized employment. In turn, regional economies and employers benefit from an expanded pool of experienced, dependable labor in the local workforce.

SCSEP participants also receive a variety of services including a comprehensive assessment, Individual Employment Plan (IEP) development, orientation, community service placement, training specific to an individual’s community service assignment, and other training as necessary. Supportive services, annual physicals, assistance in securing unsubsidized employment, and access to local American Job Centers are also

available. For a full description of the services that successful Applicants will be required to provide to SCSEP participants see 20 CFR §641, Subpart E – Services to Participants.

Program participants must be at least 55 years old, unemployed, not job-ready, and have a family income of no more than 125% of the federal poverty level. Enrollment priority is given to individuals who:

- Are veterans;
- Are over age 65;
- Have a disability;
- Have limited English proficiency (LEP) or low literacy skills;
- Reside in a rural area;
- Have low employment prospects; or
- Are homeless or at risk for homelessness.

Individual participation in SCSEP is limited to 48 months, unless an extension is authorized based on statutory requirements.

### *Operational Structure*

SCSEP is structured as separate but parallel programs, with funds awarded to State Grantees and National Grantees that are independent of each other. Both are subject to USDOL regulatory oversight in the administration of the program; NYSOFA administers SCSEP as the State Grantee. The applicant agency must directly manage and oversee the program, but, with approval from NYSOFA, may contract out a portion of the services directly provided to participants (i.e. contract out the direct provision of the authorized positions in a particular county in the region they are selected to operate).

The State SCSEP program includes 538 authorized positions<sup>1</sup> covering 27 counties across NYS. An additional 2,047 authorized positions are administered by National Grantees to ensure coverage throughout each county in NYS; these authorized positions are not part of this RFA. USDOL ensures that SCSEP services are provided equitably within each state through an Equitable Distribution<sup>2</sup> plan. Sub-recipients may only enroll participants who reside in a county in which they have authorized positions. For every authorized position, one or more individuals can receive services during the program year.

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<sup>1</sup> Authorized position level means the number of SCSEP enrollment opportunities that can be supported for a 12-month period based on the average national unit cost. The authorized position level is derived by dividing the total amount of funds appropriated for a Program Year by the national average unit cost per participant for that Program Year as determined by USDOL. The national average unit cost includes all costs of administration, other participant costs, and participant wage and benefit costs as defined in §506(g) of the OAA (20 CFR §641.140)

<sup>2</sup> The Equitable Distribution plan determines the number of authorized positions that are allocated to each county in each state by using census data by county and annual program appropriations. The number of authorized positions is proportional to the number of eligible people in the county compared to the eligible state population.

National Grantees are permitted to apply to operate one or more regions of the State SCSEP program through this RFA. If a National grantee is a successful applicant, they will be required to maintain a separation between the State authorized positions and their National authorized positions. This includes, but is not limited to, maintaining separate participant handbooks, maintaining separate policies and procedures where applicable, being able to identify the funding source (State or National) for every participant in an authorized position, and any other items specific to NYSOFA funded authorized positions.

### *State SCSEP Regions*

Region	Counties in Region	Total Number of Authorized Positions
1	Bronx, Kings, New York, Queens, Richmond	349
2	Rockland, Westchester	37
3	Albany, Fulton, Rensselaer, Saratoga, Schenectady	23
4	Clinton, Essex, Franklin	22
5	Jefferson, Lewis, St. Lawrence	32
6	Tioga, Tompkins	13
7	Genesee, Monroe, Seneca, Wayne, Yates	31
8	Chautauqua, Erie	31

See Appendix 1 – Regional Map

### *Available Funding*

The number of authorized positions and funding for each region is based on the current funding NYSOFA is receiving to operate the State grantee SCSEP program for Program Year 2017 (July 1, 2017-June 30, 2018). At the time this RFA was released, the Federal budget had not been enacted. As a result, the exact funding that will be available for the State Grantee SCSEP program in NYS is unknown and will be contingent on the availability of funding from USDOL through the enactment of the Federal budget or a continuing resolution.

It is also important to note that the funding for each authorized position is based on the federal minimum wage. As stated in 20 CFR §641.565, sub-recipients must pay participants the highest applicable required wage<sup>3</sup> for time spent in orientation, training,

<sup>3</sup> The highest applicable required wage is either the minimum wage applicable under the Fair Labor Standards Act of 1938; the State or local minimum wage for the most nearly comparable covered employment; or the prevailing rate of pay for persons employed in similar public occupations by the same

and community service assignments. New York State's minimum wage is higher than the federal minimum wage and varies throughout the state<sup>4</sup>. As a result, the authorized positions have to be modified to represent the actual number of positions that can be funded based on NYS's higher minimum wage. Please see Appendix 2 – Authorized and Modified Positions by Region for a listing of the number of authorized and modified positions per region by county.

There is also a cost sharing or matching funds component. Applicants selected for funding will be requested to provide matching funds in the form of cash or in-kind contributions equal to a minimum of ten percent (10%) of the total funding awarded. For complete information on the matching funds component see Part 1-7.

### *Program Requirements Overview*

Successful Applicants will provide services that will enable eligible older adults to enter SCSEP and actively engage in the program with the ultimate goal of transitioning to unsubsidized employment. Successful Applicants will be responsible for:

- Developing methods of recruitment and selection so that the maximum number of eligible older adults have the opportunity to participate in SCSEP;
- Providing orientation to SCSEP participants;
- Conducting a comprehensive assessment and developing an Individual Employment Plan (IEP) based on that assessment;
- Arranging for training and other supportive services identified in a participant's IEP; and
- Monitoring participant progress, including conducting reassessments.

Successful Applicants will need to establish and manage relationships with host agencies at which participants will complete their community service assignments. Community service assignments provide participants subsidized work-based training that allows them to build skills, gain confidence, and help them to transition to unsubsidized employment. Successful Applicants will also be responsible for establishing partnerships with One-Stops, Area Agencies on Aging, National grantees and other sub-recipients in their region in order to best serve participants.

SCSEP is a required partner<sup>5</sup> of the One-Stop Delivery System, which includes negotiating and signing a Memorandum of Understanding (MOU) that includes the Local Workforce Investment Board(s) for their region as well as all other One-Stop Delivery System required partners. Depending on the region, this may require entering

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employer (29 CFR §641.565(a)(ii)(2)).

<sup>4</sup> The New York State minimum wage was increased on December 21, 2016. In New York City, it is \$10.50 per hour for businesses with 10 or fewer employees, and \$11.00 per hour for businesses with 11 or more employees. In Nassau, Suffolk, and Westchester counties, it is \$10.00 per hour. In the remainder of the state, it is \$9.70 per hour. There are different hourly rates for workers in the fast food industry and those who receive tips. These rates remain in effect until December 30, 2017. For more information, including a schedule of the upcoming minimum wage increases, please visit: <https://labor.ny.gov/workerprotection/laborstandards/workprot/minwage.shtm>.

<sup>5</sup> For a full list of the required partners see 20 CFR §678.400.

into more than one MOU.

An important goal of SCSEP is to help participants achieve self-sufficiency when they exit the program. The intent is for participants to achieve self-sufficiency through unsubsidized employment, however, not all participants will be able to achieve this. For those participants that are unable to find unsubsidized employment and must exit the program when their durational limit is reached, the successful Applicants will be responsible for assisting the participant through referrals and other support opportunities.

For more information on SCSEP please see Appendix 3 – References and Appendix 4 – Glossary of Terms.

### **APPLICANT MANDATORY MINIMUM QUALIFICATIONS**

**All applicants must fulfill all of the following mandatory minimum qualifications:**

1. The Applicant (only if a non-profit organization) is prequalified in the New York State Grants Gateway at the time and date that the application is due. Municipalities are exempt from pre-qualification in the Gateway. All applicants must register in the Gateway in order to complete and submit an application.
2. The Applicant is a public entity, non-profit organization, or tribal organization.
  - A public entity is:
    - A. any state or local government;
    - B. any department, agency, special purpose district, or other instrumentality of a State or States or local government; and
    - C. the National Railroad Passenger Corporation, and any commuter authority (as defined in section 24102(4) of title 49) (42 U.S.C. §12131(1)).
  - A non-profit organization is an agency, institution, or organization which is, or is owned and operated by, one or more corporations or associations not part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual (42 U.S.C. §3002(39)).
  - A tribal organization is a recognized governing body of any Indian tribe, or any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body (42 U.S.C. §3002(54) and 20 CFR 641.140).



## **PART I: GENERAL INFORMATION FOR APPLICANTS**

### **1. MISSION STATEMENTS**

The mission of NYSOFA is to help older New Yorkers to be as independent as possible for as long as possible through advocacy, development and delivery of person-centered, consumer-oriented, and cost-effective policies, programs and services which support and empower the older adults and their families, in partnership with the network of public and private organizations which serve them.

The Mission of SCSEP is to enhance employment opportunities for older job seekers and promote older workers as a resource for businesses seeking a trained, qualified, and reliable workforce.

### **2. STATEMENT OF PURPOSE**

NYSOFA seeks to designate a sub-recipient in each of eight (8) regions of New York to oversee and administer the State sponsored Senior Community Service Employment Program on a regional basis. If an organization wishes to apply to administer SCSEP in more than one region, a separate application will need to be submitted for each region it hopes to administer.

### **3. CONFLICT OF INTEREST**

Successful applicants who enter into a contract with NYSOFA (i.e. contractors) shall not engage in any business or personal activities or practices or maintain any relationships that conflict in any way with the Contractor fully performing its obligations under this Contract.

Additionally, the Contractor acknowledges that, in governmental contracting, even the appearance of a conflict of interest is harmful to the interests of the State. Thus, the Contractor agrees to refrain from any practices, activities, or relationships that could appear to be in conflict with the Contractor's fully performing its obligations to NYSOFA under the terms of this Contract.

In the event the Contractor is uncertain whether the appearance of a conflict of interest may exist, the Contractor shall submit to NYSOFA a full disclosure statement setting forth the relevant details for NYSOFA's consideration and direction. Failure to promptly submit a disclosure statement or to follow NYSOFA's direction in regard to the apparent conflict may be grounds for termination of the Contract.

### **4. ISSUING OFFICE**

This RFA is issued by NYSOFA which shall be the sole contact for information regarding its content.

## 5. ELIGIBLE APPLICANTS

NYSOFA will accept applications from public entities, non-profit organizations, and tribal organizations. Applicants must meet all of the “Applicant Mandatory Minimum Qualifications” as stipulated on page 5 of this RFA.

Applicants should have experience working with older adults and/or experience assisting individuals with obtaining unsubsidized employment. It is preferred that Applicants have knowledge of the economic conditions and employment outlook of the region for which they are applying.

## 6. CONTRACT PERIOD

The contract period shall be for a five (5) year period, commencing on **07/01/18** and ending **6/30/23**. When completing the budget pages as found in Part III, Sections 2, 4, and 5, please prepare the budget for the first year of the five (5) year contract amount.

## 7. ANTICIPATED ANNUAL BUDGET AND FUNDING FROM STATE AND FEDERAL FUNDS

The anticipated annual budget for this service in each region is set forth below and is based on the current funding NYSOFA is receiving to operate the State Grantee SCSEP program for Program Year 2017 (July 1, 2017-June 30, 2018). At the time this RFA was released, the Federal budget had not been finalized. As a result, the exact funding that will be available for the State Grantee SCSEP program in NYS is unknown and will be contingent on the availability of funding from USDOL through the enactment of the federal budget or a continuing resolution. The funding for each region is based on the Equitable Distribution Plan created by USDOL for PY 2017. If USDOL makes any adjustments to the Equitable Distribution Plan that results in the number of authorized positions in a region changing, the funding will be adjusted accordingly in the affected region(s).

USDOL limits federal reimbursement to ninety (90) percent of the total allowable SCSEP costs. As stated in 20 CFR § 641.809 (e), “a recipient may not require a sub-recipient or host agency to provide non-Federal resources for the use of the SCSEP project as a condition of entering into a sub-recipient or host agency relationship. This does not preclude a sub-recipient or host agency from voluntarily contributing non-Federal resources for the use of the SCSEP project.” NYSOFA does not have a source of funds for matching SCSEP funds that are allocated to the regional sub-recipients. Therefore, in order to continue to operate the State Grantee SCSEP program, NYSOFA requests that applicants voluntarily provide non-federal match to help with the matching requirement, including where able, providing over-match to enable NYSOFA to meet the overall, statewide matching requirement.

Matching funds may be provided in cash, in-kind, or a combination of the two. NYSOFA’s matching funds guidelines are:

- Other federal funds may not be used to match SCSEP funds unless specifically stated in the authorizing legislation;
- Matching expenditures must meet all criteria for allowable costs under SCSEP. They must be for authorized employment activities for SCSEP participants;
- In-kind contributions must be reasonable and properly documented. NYSOFA only allows donations of space, salaries/wages and related fringe benefits for in-kind expenses. For example, the value of in-kind personal services such as the value of the supervision and training received at the community service assignment and/or space provided by a third party are allowable. These costs must be borne by a third party at no cost to the sub-recipient or any SCSEP contractor(s). The amount of matching expenses reported for the program must not exceed the actual documented cost to the contributing party; and
- The sources of the funds used as matching costs must be allowable. They must include funds or in-kind contributions not used to match other State or Federal funds. Matching expenditures must be documented consistent with the documentation provided for expenditures of Federal funds.

Applicants are to complete the application budget pages (Attachment B, Attachment E, and Attachment E-1, if applicable) in the Grants Gateway. The total expenditures included in an applicant's budget MUST equal the funding amount of the region for which the applicant is applying.

There are three allowable cost categories for each budget:

1. Enrollee wages and fringe benefits (EWFB): Applicants must allocate the amount of funding for the region for which they are applying to EWFB as stated in the chart below. These are dedicated funds for the wages and fringe benefits for the time that participants spend in approved program activities, such as orientation, training, and community service assignments.
2. Administration: Costs associated with performing overall general administrative and coordination functions. Administrative costs cannot exceed 9.45% of the total contract amount.
3. Program/other costs: Costs in this category include, but are not limited to, outreach, recruitment, and selection of participants, participant intake and orientation, and assessments; participant training; job placement assistance; participant supportive services; and program staff salaries.

Successful applicants must spend 100% of their total federal funding annually as carryover of funds is not permitted. For more information on the use of SCSEP funds

and allowable costs please see 20 CFR §641, Subpart H – Administrative Requirements.

**State SCSEP Funding by Region for PY 18 (July 1, 2018 – June 30, 2019)**

Region	EWFB Amount	Administration and Program/Other Costs Amount	Total Amount
1	\$2,574,033	\$643,507	\$3,217,540
2	\$272,892	\$68,223	\$341,115
3	\$169,635	\$42,409	\$212,044
4	\$162,260	\$40,565	\$202,825
5	\$236,014	\$59,004	\$295,018
6	\$95,881	\$23,970	\$119,851
7	\$228,639	\$57,160	\$285,799
8	\$228,639	\$57,160	\$285,799

8. TIME TABLE\*

01/25/18	Release of Request for Applications
02/09/18	Last date to submit questions regarding RFA
02/23/18	Answers to questions issued/posted
03/12/18	Application packages must be received by 4:00 p.m. this date. Please see Part I -11 for more detail regarding submission of applications.
04/20/18	Anticipated date to notify successful applicant
07/01/18	Contract commences
06/30/23	Contract ends

**\* NYSOFA reserves the right to revise any of these dates, as necessary.**

9. QUESTIONS CONCERNING THE RFA

Prospective applicants may submit written questions to **Jennifer Unser**, who is the designated contact, by e-mail to [Jennifer.Unser@aging.ny.gov](mailto:Jennifer.Unser@aging.ny.gov) or by fax to **(518) 473-5177** starting on 01/25/18 and no later than **4 PM, 02/09/18**. No telephone calls will be accepted. **Each question should cite the particular RFA part, page and number to which it refers.** Questions received after the deadline will not be answered. A summary of the questions and answers will be posted on NYSOFA's website at <http://www.aging.ny.gov/ContractsandGrants/index.cfm>. From the RFA issuance date

until the selection, all contacts with NYSOFA concerning the contents of this RFA shall be made through **Jennifer Unser**.

#### 10. ADDENDUM TO RFA

NYSOFA reserves the right to amend the RFA by providing addenda. The addenda will be posted on NYSOFA's website at <http://www.aging.ny.gov/> and made available via Grants Gateway. If a prospective applicant has any questions regarding whether any addenda were issued, please e-mail **Jennifer Unser** at [Jennifer.Unser@aging.ny.gov](mailto:Jennifer.Unser@aging.ny.gov).

#### 11. SUBMISSION OF APPLICATION

A. Applications must be submitted online via the New York State Grants Gateway by **03/12/2018 at 4:00 p.m.**, as referenced in Part 1, Number 8 of this RFA. Tutorials (training videos) for use of the Grants Gateway are available at the following web address (and upon user log in):  
[https://grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/GOPortal.aspx](https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/GOPortal.aspx).

New York State vendors must register in Grants Gateway and establish users in the system. To start this process, from the Grants Opportunity Portal ([https://grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/goportal.aspx](https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx)), under Registration, click "Request Access Now!" to view your options. For existing NYS vendors, there is only one step. You must submit a Registration Form for your Administrators identifying a Delegated Administrator responsible for managing your organization's profile and users.

To find out if your organization has already registered, enter its SFS Vendor ID number and search. If your organization is registered, the search result will include contact information for its Delegated Administrator, and you can contact this individual to request access to the system. If your organization is not registered, the search results will provide a link to the Request Form for your Administrator, which you will need to complete and submit pursuant to the instructions provided by Grants Gateway. If your organization is not registered but has a SFS Vendor ID, you will still need to submit the Registration Form and a copy of your agency's organizational chart in order to register.

In addition to Grants Gateway registration, all non-governmental Not for Profit (NFP) applicants must be Prequalified at the time and date that the application is due. If you are not Prequalified at that time and date, your application will not be considered. For more information about Grants Gateway Prequalification, please visit the Grants Gateway website <http://www.grantsreform.ny.gov/Grantees> or contact the Grants Reform Team at: [grantsreform@its.ny.gov](mailto:grantsreform@its.ny.gov). The Grants Reform help desk/hotline can be reached at (518) 474-5595. In keeping with this requirement, any application from a non-governmental NFP which has a status other than one of the following at the time and date that the application is due shall not be considered for funding:

- Document Vault Prequalified;
- Document Vault Prequalified Open;
- Document Vault Prequalified/In review; or
- Document Vault Open for PQS Edits

To apply, log into the Grants Gateway and click on the View Opportunities button under View Available Opportunities. To get started, in the Search Criteria, enter the Grant Opportunity name listed on the cover of the RFA and select the Office for the Aging as the Funding Agency and hit the Search button. Click on the name of the Grant Opportunity from the search results grid and then click on the APPLY FOR GRANT OPPORTUNITY button located bottom left of the Main page of the Grant Opportunity.

In order to access the online application and other required documents such as the attachments, Applicants MUST be registered and logged into the Grants Gateway system in the user role of either a “Grantee” or a “Grantee Contract Signatory.” **However, only “Grantee Contract Signatory” role can submit the application.** The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway:

Role	Create and Maintain User Role	Initiate Application	Complete Application	Submit Application	Only view the Application/ Contract
Delegated Admin	✓				
Grantee		✓	✓		
Grantee Contract Signatory		✓	✓	✓	
Grantee Payment Signatory		✓	✓	✓	
Grantee System Administrator		✓	✓	✓	
Grantee View Only					✓

Reference materials and videos are available for Grantees applying to funding opportunities on the Grants Gateway. Please visit the Grants Reform website at the following web address: <http://grantsreform.ny.gov/Grantees> and select the “Grantee Quick Start Guide” from the menu. There is also a more detailed “Grantee User Guide” available on this page as well.

Once the application is complete, Applicants are strongly encouraged to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient opportunity for the applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. Grants Reform staff are available to answer applicants’ technical questions and provide technical assistance prior to the application due date and time.

**Please note:** Although the Grants Reform staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no

guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding.

**Late applications will not be accepted. Applications will may only be submitted via Grants Gateway.**

B. Completion of the following sections of the Application contained in this RFA document (Part III) are required.

- ◆ Expenditure Based Budget (Part III-2, Attachment B)
- ◆ Program Work Plan (Part III-3, Attachment C)
- ◆ Supplementary Budget (Part III-4, Attachment E)
- ◆ Subcontractor Budget (if applicable) (Part III-5, Attachment E-1)
- ◆ Supplementary Program Work Plan (Part III-6, Attachment W)
- ◆ Answers to Program Specific Questions (Part III-7)

**NOTE:** The RFA can also be found at <http://www.aging.ny.gov/>.

**An incomplete submission will be scored accordingly based upon the documents received. NYSOFA will not contact applicants regarding missing sections.**

The following documents included in the RFA package will form the basis of the contract with NYSOFA:

- ◆ State of New York Master Contract for Grants and Payment and Reporting Schedule  
([https://grantsreform.ny.gov/sites/default/files/docs/nys\\_master\\_contract\\_for\\_grants\\_8\\_14.pdf](https://grantsreform.ny.gov/sites/default/files/docs/nys_master_contract_for_grants_8_14.pdf))
- ◆ Agency and Program Specific Clauses (Part II-1, Attachment A-1)
- ◆ Federal Specific Clauses (Part II-2, Attachment A-2)
- ◆ Expenditure Based Budget (Part III-2, Attachment B)
- ◆ Program Work Plan (Part III-3, Attachment C)
- ◆ Supplementary Budget (Part III-4, Attachment E)
- ◆ Supplementary Program Work Plan (Part III-6, Attachment W)

C. Other documents that should be submitted:

- ◆ MacBride Fair Employment Principles Certification Form (\* see note below)
- ◆ Vendor Responsibility Questionnaire (\* see note below)
- ◆ Non-Collusive Bidding Certification (\* see note below)
- ◆ Encouraging Use of New York State Businesses in Contract Performance (\*see below)

\* The MacBride Fair Employment Principles Certification Form, Vendor Responsibility Questionnaire, and Non-Collusive Bidding Certification forms should be submitted with the application. Although these documents are not part of the application package, they are required prior to the execution of all contracts. Please refer to Part IV for specific

submission instructions for each of these disclosure documents. Regarding forms that must be received by NYSOFA, please submit a signed copy.

D. Minority and Women-Owned Business Enterprise (MWBE) and Equal Employment Opportunity (EEO) Forms (Attachments V-4 through V-6) – Please see Part I, Number 17 on page 15 for details about the MWBE requirements. Applicants may include the following forms but they are not required at the time of application. Successful applicants will be required to submit all MWBE and EEO forms prior to contract approval:

- ◆ MWBE Utilization Plan (MWBE 103)
- ◆ EEO Staffing Plan (MWBE 101)
- ◆ MWBE/EEO Policy Statement (MWBE 100)

These forms are required to ensure that the applicant is in full accord with the aims and efforts of the State of New York to promote equal opportunity for all persons, and to promote equality of economic opportunity for minority group members and women who own business enterprises, and to ensure there are no barriers, through active programs, that unreasonably impair access by MWBEs to state contracting opportunities. It is understood that the extent of the applicant's MWBE subcontracting plans may not be known at the point of submission of the application. The applicant(s) selected for an award may be required to resubmit the required MWBE documents when contracting activities are finalized.

## 12. ORAL PRESENTATIONS

NYSOFA reserves the right to require any applicant under final consideration to make an oral presentation on their application at the NYSOFA office in Albany.

## 13. REQUEST FOR CLARIFICATION

Requests for clarification **will be sent via email only** and will only be sent to the email address(es) associated with the application in Grants Gateway (for information on how to associate an email address with an application please contact the Grants Reform Team at: [grantsreform@its.ny.gov](mailto:grantsreform@its.ny.gov)). The applicant is solely responsible for keeping their application, including their organization information, in Grants Gateway up to date and accurate.

Information must be submitted in writing via Grants Gateway and will be included as a formal part of the applicant's application. The applicant must resubmit the application after providing any requested information in order for the application to continue through the review process.

## 14. INCURRED COSTS

The State of New York is not liable for any costs incurred prior to the approval of a



contract by the Office of the State Comptroller (OSC).

#### 15. DISCLOSURE OF APPLICATION CONTENTS

Except to the extent permitted by law, applications will not be disclosed, except for purposes of internal agency evaluation, prior to approval by the Office of the State Comptroller of the resulting contract. All materials submitted become the property of the State and may be returned at the State's discretion. Submitted applications may be reviewed and evaluated by any person designated by NYSOFA, other than one associated with a competing applicant. NYSOFA reserves the right to use any and all ideas presented in any response to the RFA. Selection or rejection of an application does not affect this right.

If an applicant believes that any information in their application constitutes a trade secret, they may request that such information not be disclosed if requested by a member of the public pursuant to the State Freedom of Information Law. In these instances, the applicant shall submit with its application a letter specifically identifying by page number, line, or other appropriate designation, that information which is a trade secret and explaining in detail why such information is a trade secret. This letter should be uploaded into the Document Vault within their Grants Gateway application. Failure by an applicant to submit such a letter with its application identifying trade secrets shall constitute a waiver by the applicant of any rights it may have under Section 87 of the Public Officers Law relating to protection of trade secrets.

#### 16. LIMITS ON ADMINISTRATIVE EXPENSES AND EXECUTIVE COMPENSATION

NYSOFA has adopted a regulation (Title 9 NYCRR Part 6656) implementing Executive Order No. 38 providing for a limit on administrative expenses and executive compensation of providers of program services in order to meet the State's ongoing obligation to ensure the proper use of taxpayer dollars and the most effective provision of such services to the public. Effective July 1, 2013, covered providers must spend no more than a specified percentage of covered operating expenses funded with State funds or State-authorized payments on administrative expenses. In addition, a covered provider may not use State funds or State-authorized payments for executive compensation given directly or indirectly to a covered executive in an amount greater than \$199,000. These limits apply to covered providers (including subcontractors) receiving State funds or State-authorized funds unless a waiver of the limit on administrative expenses and/or limit on executive compensation has been granted. Covered providers are required to submit a completed EO#38 Disclosure Form for each covered reporting period within 180 days following the period. Additional information about Executive Order 38 can be found on the E.O. 38 website (<http://executiveorder38.ny.gov/>).

17. CONTRACTOR REQUIREMENTS AND PROCEDURES FOR BUSINESS PARTICIPATION OPPORTUNITIES FOR NEW YORK STATE CERTIFIED MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISES AND EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITY GROUP MEMBERS AND WOMEN NEW YORK STATE LAW

Pursuant to New York State Executive Law Article 15-A, NYSOFA recognizes its obligation under the law to promote opportunities for maximum feasible participation of certified minority-and women-owned business enterprises and the employment of minority group members and women in the performance of NYSOFA contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority-and women-owned business enterprises in state procurement contracting versus the number of minority-and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that NYSOFA establishes goals for maximum feasible participation of New York State Certified minority- and women – owned business enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

**Business Participation Opportunities for MWBEs**

For purposes of this procurement, NYSOFA hereby establishes an overall goal of 30% for MWBE participation with a recommended breakdown of 15% for Minority-Owned Business Enterprises ("MBE") participation and 15% for Women-Owned Business Enterprises ("WBE") participation. Contractors are encouraged to fulfill the suggested 15% goal for both MBE and WBE vendors; however, strict adherence to the suggested MBE and WBE percentages is not mandatory as long as the overall 30% goal is met. A contractor ("Contractor") on the subject contract ("Contract") must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that NYSOFA may withhold payment pending receipt of the required MWBE documentation. The directory of New York State Certified MWBEs can be viewed at [www.esd.ny.gov/mwbe.html](http://www.esd.ny.gov/mwbe.html). For guidance on how NYSOFA will determine a Selected Applicant's "good faith efforts," refer to 5 NYCRR §142.8.

In accordance with 5 NYCRR §142.13, the Selected Applicant acknowledges that if it is

found to have willfully and intentionally failed to comply with the MWBE participation goals set forth in the Contract, such finding constitutes a breach of Contract and NYSOFA may withhold payment from the Contractor as liquidated damages.

Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the Selected Applicant achieved the contractual MWBE goals; and (2) all sums actually paid to MWBEs for work performed or materials supplied under the Contract.

By submitting a bid or application, a bidder on the Contract ("Bidder" also referred to as Applicant in this RFA) agrees to submit the following documents and information as evidence of compliance with the foregoing:

- A. Bidders are required to submit a MWBE Utilization Plan on Form MWBE 103 with their bid or application. Any modifications or changes to the MWBE Utilization Plan after the Contract award and during the term of the Contract must be reported on a revised MWBE Utilization Plan and submitted to NYSOFA.
- B. NYSOFA will review the submitted MWBE Utilization Plan and advise the Bidder of NYSOFA acceptance or issue a notice of deficiency within 30 days of receipt.
- C. If a notice of deficiency is issued, Bidder agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt by submitting to NYSOFA, Sandy Harvey, 2 Empire State Plaza, 3<sup>rd</sup> Floor, Albany, NY 12223, (518) 408-1709, Fax (518) 474-7949, a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by NYSOFA to be inadequate, NYSOFA shall notify the Bidder and direct the Bidder to submit, within five (5) business days, a request for a partial or total waiver of MWBE participation goals on Form MWBE 104. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or application.
- D. NYSOFA may disqualify a Bidder as being non-responsive under the following circumstances:
  - a) If a Bidder fails to submit a MWBE Utilization Plan;
  - b) If a Bidder fails to submit a written remedy to a notice of deficiency;
  - c) If a Bidder fails to submit a request for waiver; or
  - d) If NYSOFA determines that the Bidder has failed to document good faith efforts.

Contractors shall attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the Contract. Requests for a partial or total waiver of established goal requirements made subsequent to Contract Award may be made at any time during the term of the Contract to NYSOFA, but must be made no later than prior to the submission of a request for final payment on the Contract.

Contractors are required to submit a Contractor's Quarterly M/WBE Contractor Compliance & Payment Report on Form MWBE 105 to NYSOFA by the 10<sup>th</sup> day following each end of quarter over the term of the Contract documenting the progress made toward achievement of the MWBE goals of the Contract.

### **Equal Employment Opportunity Requirements**

By submission of a bid or application in response to this solicitation, the Bidder/Contractor agrees with all of the terms and conditions of the Master Contract for Grants, including IV (J); Minority and Women Owned Business. The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work") except where the Work is for the beneficial use of the Contractor, shall undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

Bidder further agrees, where applicable, to submit with the bid a staffing plan (Form MWBE 101) identifying the anticipated work force to be utilized on the Contract and if awarded a Contract, will, upon request, submit to NYSOFA, a workforce utilization report (MWBE 102) identifying the workforce actually utilized on the Contract if known.

Further, pursuant to Article 15 of the Executive Law (the "Human Rights Law"), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

**Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.**

### **18. MACBRIDE FAIR EMPLOYMENT**

The provisions of the Nondiscrimination in Employment in Northern Ireland: MacBride Fair Employment Principles Certification (see Part IV-1.) will be a part of the final

contract and all applicants must fully complete and sign.

19. NEW YORK STATE MASTER CONTRACT FOR GRANTS STANDARD CLAUSES

The Master Contract for Grants, found at [https://grantsreform.ny.gov/sites/default/files/docs/nys\\_master\\_contract\\_for\\_grants\\_8\\_14.pdf](https://grantsreform.ny.gov/sites/default/files/docs/nys_master_contract_for_grants_8_14.pdf), will be made a part of the final contract and the parties shall agree to be bound by the terms and conditions thereof.

20. AGENCY SPECIFIC AND PROGRAM SPECIFIC CLAUSES

The provisions of Attachments A-1 and A-2 (Part II-1. and Part II-2.), which is attached hereto, will be made a part of the final contract and the parties shall agree to be bound by the terms and conditions thereof.

21. VENDOR RESPONSIBILITY

Procurement laws and guidelines require the award of New York State contracts to responsible contractors. Vendor responsibility generally means that a selected applicant has the integrity to justify the award of public dollars and the capacity to fully perform the requirements of the contract. It is the State's responsibility to evaluate the responsibility of a prospective contractor. A responsibility determination, wherein the State determines that it has reasonable assurances that a contractor is responsible, is an important part of the procurement process, promoting fairness in contracting and protecting a contracting State agency and the State of New York against failed contracts.

The following factors are considered in making a responsibility determination:

- legal authority to do business in New York State
- integrity
- capacity - both organizational and financial
- previous performance

The contracting State agency is required to conduct a review of a prospective contractor to provide reasonable assurances that the contractor is responsible. The Office of the State Comptroller (OSC) maintains the VendRep system, which allows business entities (vendors) to enter and maintain their Vendor Responsibility Questionnaire (VRQ) information in a secure, centralized database. It is recommended that all potential vendors prepare their VRQ on-line as follows: [http://www.osc.state.ny.us/vendrep/vendor\\_index.htm](http://www.osc.state.ny.us/vendrep/vendor_index.htm) and do so at the time of application submission. For direct VendRep user assistance, the OSC Help Desk may be reached at 866-370-4672 or 518-408-4672, or by e-mail at [helpdesk@osc.state.ny.us](mailto:helpdesk@osc.state.ny.us).

If a potential vendor opts to use the paper copy, the form is found at [http://www.osc.state.ny.us/vendrep/forms\\_vendor.htm](http://www.osc.state.ny.us/vendrep/forms_vendor.htm) on the OSC website. This information is also included in Part IV – 2. of this RFA.

## 22. TAX PROVISIONS

Purchases made by the State of New York are not subject to state or local sales taxes or federal excise taxes. The official State of New York Voucher for materials, equipment, supplies and services is sufficient evidence to exempt the transaction from sales tax under section 1116 (a)(1) of the Tax Law.

## 23. ACCESSIBILITY OF STATE AGENCY WEB-BASED INTRANET AND INTERNET INFORMATION AND APPLICATIONS

Any web-based information and applications development, or programming delivered pursuant to the contract or procurement, will comply with New York State Enterprise IT Policy NYS-P08-005, Accessibility of Web-Based Information and Applications as such policy may be amended, modified or superseded, which requires that state agency web-based information and applications are accessible to persons with disabilities. Web-based information and applications must conform to New York State Enterprise IT Policy NYS-P08-005 as determined by quality assurance testing. Such quality assurance testing will be conducted by NYSOFA, contractor or other and the results of such testing must be satisfactory to NYSOFA before web-based information and applications will be considered a qualified deliverable under the contract or procurement.

## 24. NON-COLLUSIVE BIDDING CERTIFICATION

Section 139-d of the State Finance Law requires each applicant to sign a non-collusive bidding certification. This certification may be found in Part IV – 3.

## 25. NOTIFICATION OF AWARD

After evaluation and selection of the successful applicants, all applicants will be notified by NYSOFA in writing of the outcome of their application. **The successful applicants' press releases pertaining to this program shall not be made public without prior written approval by NYSOFA.**

## 26. DEBRIEFINGS AND PROTESTS

As noted above, the State shall provide all applicants with written notice of the contract award. Unsuccessful applicants may request and are entitled to a debriefing. Any interested party may protest the contract award. The notice of contract award will state how to request a debriefing and the date by which a debriefing must be requested.

The complete Protest and Debriefing Procedure for Competitive Awards by the New

York State Office for the Aging can be found at: <http://www.aging.ny.gov/contractsandgrants/protestprocedure.cfm>. A copy of the procedure will be provided to any applicant upon request.

#### 27. APPLICATION EFFECTIVE PERIOD

All Applications received in response to this RFA will remain in effect for at least ninety (90) days following the final date for submission of Applications.

#### 28. APPLICATION MODIFICATION

Should a successful applicant wish to significantly modify its program activities after notification of the award, NYSOFA reserves the right to rescind the award.

#### 29. REIMBURSEMENT

All claims for payment shall be submitted in accordance with procedures as set forth in the Payment and Reporting Schedule (Attachment D of the Master Contract for Grants). The successful applicant will be eligible for a 25 percent advance payment upon execution of a contract between the successful applicant and NYSOFA and subject to the availability of funds.

For-profit entities are not eligible for an advance. Under no circumstances will any contract be valid and enforceable until approved by the Office of the State Comptroller. All subsequent payments will be made on a reimbursement basis following expenditures for approved costs in accordance with the contract budget (Part III-2 - Attachment E).

Reimbursement vouchers must be submitted on at least a quarterly basis. If an advance payment is made, it will be recouped against amounts due on reimbursement claims submitted during the latter part of the contract period. The final claim for payment must be submitted within sixty (60) days following the end of the contract period.

#### 30. REVIEW PANEL AND EVALUATION CRITERIA

Selection of the successful applications will be done by a review panel designated by NYSOFA. The applications will be rated on each of the following criteria:

- Responses to Program Specific Questions 1-16.....Maximum 80 Points
  - Applicant Experience (questions 1-2)
  - Regional Overview (question 3)
  - Organizational Structure and Program Management (questions 4-9)
  - Partnerships and Employer Relations (questions 10-12)
  - Participant Services (questions 13-16)



- Budget.....Maximum 20 Points
  - Attachment B – Expenditure based budget
  - Attachment E – Supplementary Budget
  - Attachment E-1 – Subcontractor Budget, if applicable
  - Response to Program Specific Question 17

In order for an applicant to receive the maximum available points for an individual question, the applicant must exceed expectations for that individual response. Exceeding is evidenced by providing an answer that clearly demonstrates additional information than what is asked in the stated question. This could include, but is not limited to, program enhancements, expanded services, additional resources, etc.

### 31. WORKERS' COMPENSATION LAW

The Workers' Compensation Law requires that the State obtain evidence that all contracting organizations maintain the required Workers Compensation and Disability Benefits Insurance for their employees. The successful applicant will need to supply NYSOFA with a copy of form C-105.2 Certificate of Workers' Compensation Insurances and a copy of form DB-120.1 Disability Benefits Insurance or a copy of form CE-200, Attestation of Exemption. These forms can be obtained from your insurance carrier. The name and address of NYSOFA must appear as the entity requesting proof of coverage (listed as the certificate holder) on form C-105.2 and DB-120.1.

### 32. IRAN DIVESTMENT ACT

By submitting a bid/Application in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, Bidder/Contractor (or any assignee) certifies that it is not on the "Entities Determined to be Non-Responsive Bidders/Offerers Pursuant to the New York State Iran Divestment Act of 2012" list ("Prohibited Entities List") posted on the OGS website at: <http://www.ogs.ny.gov/about/regs/docs/ListofEntities.pdf> and further certifies that it will not utilize on such Contract any subcontractor that is identified on the Prohibited Entities List. Additionally, bidder/Contractor is advised that should it seek to renew or extend a Contract awarded in response to the solicitation, it must provide the same certification at the time the Contract is renewed or extended.

During the term of the Contract, should NYSOFA receive information that a person (as defined in State Finance Law §165-a) is in violation of the above-referenced certifications, NYSOFA will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then NYSOFA shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, seeking compliance, recovering damages, or declaring the Contractor in default. NYSOFA reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a



contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

### 33. STATE RESERVED RIGHTS

New York State Procurement Rights.

NYSOFA reserves the right to:

1. Prior to the application review, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available;
2. Prior to the application review, direct applicants to submit proposal modifications addressing subsequent RFA amendments;
3. Change any of the scheduled dates;
4. Reject applications that fail to meet mandatory minimum qualifications;
5. Withdraw the RFA at any time, at the agency's sole discretion;
6. Eliminate any specifications that cannot be complied with by all of the prospective applicants;
7. Disqualify any applicants whose conduct and/or application fails to conform to the requirements of the RFA;
8. Require clarification at any time during the application process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an applicant's application and/or to determine an applicant's compliance with the requirements of the application;
9. Use application information obtained through site visits, management interviews and the State's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA;
10. Make an award under this RFA in whole or in part; and
11. Utilize any and all ideas submitted in the proposals received.

**PART II: CONTRACT TERMS**  
**1. PROGRAM SPECIFIC TERMS and CONDITIONS**  
**ATTACHMENT A-1**

The provisions of Sections I through IV of this Attachment A-1 apply to all New York State Office for the Aging (NYSOFA) grant contracts unless expressly superseded by the provisions of Attachment A-2 (Federally Funded Grants). Program specific clauses, if any, are contained in Section V of this Attachment A-1.

**I. General Provisions**

- A. Laws, Rules, Regulations:** The Contractor shall comply with any provisions of the Older Americans Act of 1965, as amended, determined applicable by the State, and all rules and regulations pertaining thereto promulgated by the Administration on Community Living, United States Department of Health and Human Services, or other appropriate federal governmental agency, which are in effect or become effective during the term of this Agreement. The Contractor shall comply with all applicable New York State Laws, including the State Finance Law and Article II, Title I of the Elder Law, and with all applicable rules and regulations of the State and the Office of the State Comptroller which are in effect or become effective during the term of this Agreement.
- B. Federal and State Non-Discrimination Statutes:** The Contractor agrees to comply with all applicable federal and State non-discrimination laws and regulations affecting this agreement, including the Age Discrimination in Employment Act of 1975, as amended (*29 U.S.C. 621, et seq.*), Section 504 of the Rehabilitation Act, as amended, Civil Rights Act of 1964, Title VI, as amended, the Equal Employment Opportunity Act of 1972 (*42 U.S.C. 2000e, et seq.*) and Equal Pay Act of 1963, as amended (*29 U.S.C. 206*), and all rules and regulations pertaining thereto promulgated by the United States Department of Health and Human Services, or other appropriate federal governmental agency as identified in these program specific terms and conditions, which are in effect or become effective during the term of this Agreement, and the New York State Human Rights Law. The Contractor agrees to comply with the Americans with Disabilities Act of 1990 (*42 U.S.C. 12101, et seq.*) which protects qualified individuals with disabilities from discrimination in employment and provides access to public services. Reasonable accommodations must be made for any person with a disability desiring to participate in services funded under this Agreement; no fees can be charged to the participant for such accommodations.
- C. State Monitoring:** The Contractor shall comply with the program management and assessment requirements of the State, including but not limited to announced and unannounced on-site visits by State staff, disclosure of all program files and related fiscal records and development of a corrective action plan if required by the State in a program assessment report.

**D. Program Changes:** The Program Work Plan (Attachment C) shall not be modified without approval from the State. If modification to the Program Work Plan is necessary, the Contractor must submit a written request to the State and await State approval before implementing such changes.

**E. Notice:**

1. Notices to the State shall be addressed to the New York State Office for the Aging at the address identified on the face page of this Master Contract and shall include the Project Name and Contract Number.

2. Notices to the Contractor shall be addressed to the Contractor's designee as designated in Attachment W, the Work Plan.

**F. Subcontracts:** The Contractor may enter into subcontracts for the provision of the services described in the Program Work Plan. All such subcontracts shall be written according to State and local standards and a copy of each executed subcontract shall be forwarded to the State prior to payment by the State for expenditures incurred under such subcontract. All applicable grant provisions contained in this contract and agreed to by the contractor must be extended to each subcontractor and included in the contract with the subcontractor. It shall be the responsibility of the Contractor to monitor and assess the activities performed under such subcontracts, and to ensure that these activities are provided in accordance with all applicable requirements contained in this Agreement.

**G. Funding Source Recognition:** The Contractor agrees that any public information materials or other printed or published materials will give due recognition to the fact that the program is supported with State Funds and such recognition will be in a form prescribed by the State. Where the Contractor acknowledges the funding source for and/or assistance in acquiring equipment, the acknowledgment must give due recognition to the fact that the acquisition was made possible by a grant of State funds and such recognition will be in a form prescribed by the State.

**H. Aging Network Cooperation:** The Contractor shall work cooperatively with and consult with the Area Agencies on Aging in the region to be served by this Agreement.

**I. Community Cooperation:** The Contractor shall work cooperatively with public and private agencies, institutions, organizations, and associations within New York State and, where appropriate, with national organizations in the development of activities under this Agreement.

**J. Contract Personnel:** The Contractor shall assume responsibility for recruitment, retention, and/or dismissal of all personnel to be employed in the conduct of this Agreement. The Contractor shall ensure that the personnel hired are qualified to

carry out the activities outlined in this Agreement.

**K. Supplement of Existing Funding:** The Contractor agrees that these funds shall be used to supplement, and not supplant, any existing public or private funding.

**L. Indemnification Claims or Lawsuits:** The Contractor, solely at its expense, shall defend any claim or suit which may be brought against the State for the infringement of United States patents, copyrights, or trademarks arising from the Contractor's or the State's use of any equipment, materials or information prepared, developed, or furnished by the Contractor in connection with the performance of this contract, and in any such suit shall satisfy any final judgment for such infringement. The State will give the Contractor written notice of such claim or suit and full right and opportunity to conduct the defense thereof, together with full information and all reasonable cooperation. If principles of governmental or public law are involved, the State may participate in the defense of any action identified but no costs or expenses shall be incurred upon the account of the Contractor without the Contractor's written consent. If, in the Contractor's opinion, the equipment, materials, or information mentioned above is likely to or does become the subject of a claim of infringement of a United States patent, trademark, or copyright, then, without diminishing the Contractor's obligation to satisfy any final award, the Contractor may substitute other suitable equipment, materials and information, or at the Contractor's option and expense, obtain the right for the Contractor and the State to continue the use of such equipment, materials and information. If the Contractor wishes to use copyrighted, patented, or trademarked material it shall be responsible to obtain such rights to reproduction and use of the materials so that the State can use it in any way it deems necessary, including all rights to copy and reproduce such materials it sees fit. This will not be at any additional expense to the State beyond the amount of the contract.

## **II. Term, Termination and Suspension**

**A. Final Accounting:** The Contractor shall make a full and final accounting of all funds received under this Agreement within sixty (60) days of receipt or issuance of a notice of termination.

## **III. Payment and Reporting**

No additional provisions

## **IV. Additional Contractor Obligations, Representations and Warranties**

### **A. Property**

1. The Contractor agrees that all rights and title to any materials (manuals, tests, guides, audio or visual materials or devices) developed with funds under this Agreement shall become the property of the State. Reproduction, distribution, sale, release or other use of such material by the Contractor must be specifically

requested in writing by the Contractor and must receive prior approval by the State.

2. Equipment (those items having an acquisition cost of \$1,000 or more per unit and a useful life of at least one year) purchased under this Agreement shall be the property of the Contractor and shall be used by the Contractor in the program for which it was acquired as long as needed, whether or not the Contractor continues to receive State funds. The State reserves the right to require the transfer of the equipment purchased under this Agreement if it is no longer needed in the program for which it was acquired.

3. The Contractor understands and agrees that all equipment purchased by the Contractor and its subcontractors under this Agreement will only be used to benefit older New Yorkers. Further, the Contractor agrees that all such equipment will be used for non-sectarian purposes.

## **B. Safeguards for Services**

1. The Contractor shall utilize these State funds to provide services to any older New Yorker that may wish to avail themselves of the service, subject to the availability of funding. This does not preclude the Contractor from establishing uniformly applied, non-discriminatory service eligibility criteria or prioritizing the provision of services based on a standardized determination of older New Yorkers' needs, subject to the State's approval.

2. The Contractor shall:

- a. assure equal access for participation, services, activities and informational sessions without regard to race, color, religion, disability, sex, national origin, partisan affiliation or sexual orientation even if the contractor's organization operates primarily to serve a particular ethnic, religious or other specific population or special interest group;
- b. prevent the use of official authority, influence or coercion to interfere with or affect elections or nominations for public office;
- c. assure there is no coercion nor advice to other persons to contribute anything of value to a party, committee, organization, agency, or person for political purposes, nor engage in any other partisan activities;
- d. assume that services provided are secular in nature and in no event are state funds to be used for religious/sectarian purposes or activities or to benefit a religious institution.

**C. Confidentiality:** The Contractor, in addition to any other applicable federal or State confidentiality requirements, agrees to maintain the confidentiality of all personal information pertaining to older New Yorkers served under this Agreement; disclosure of such information may be made only when necessary to the provision of services, unless the older New Yorker or his/her authorized representative gives his/her informed consent to disclose such information,

disclosure is required by court order, or such information is provided in summary, statistical, or other form, which does not identify particular individuals.

**D. Participation Opportunities for New York State Certified Service-Disabled**

**Veteran-Owned Businesses:** Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses (“SDVOBs”), thereby further integrating such businesses into New York State’s economy. NYSOFA recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of NYSOFA contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

For purposes of this procurement, NYSOFA conducted a comprehensive search and determined that the Contract does not offer sufficient opportunities to set specific goals for participation by SDVOBs as subcontractors, service providers, and suppliers to Contractor. Nevertheless, Bidder/Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>

Bidder/Contractor is encouraged to contact the Office of General Services’ Division of Service-Disabled Veteran’s Business Development at 518-474-2015 or [VeteransDevelopment@ogs.ny.gov](mailto:VeteransDevelopment@ogs.ny.gov) to discuss methods of maximizing participation by SDVOBs on the Contract.

**V. Program Specific Clauses**

- A. Notwithstanding any other provision to the contrary, for this contract the terms “older adults” or “older New Yorkers” shall be a reference to people 55 and older.
- B. The Contractor agrees to comply with all NYSOFA policies and procedures applicable to SCSEP including, but not limited to, NYSOFA’s policy and procedure for complying with the non-discrimination and equal opportunity provisions of the Workforce Innovation and Opportunity Act (WIOA) and the corresponding regulations (29 CFR Part 38).
- C. Any Contractor that also is a SCSEP National Grantee, or is a National Grantee’s subrecipient, is required to maintain a separation between the State

authorized positions and their National authorized positions. This includes, but is not limited to, maintaining separate participant handbooks, maintaining separate policies and procedures where applicable, being able to identify the funding source (State or National) for every participant in an authorized position, and any other items specific to NYSOFA funded authorized positions.

- D. The Contractor will participate in the negotiation of and sign as a party to a Memorandum of Understanding between the Local Workforce Development Board and all required partners of the One-Stop delivery system in each local workforce development area that overlaps with the SCSEP region they are operating.

**PART II**  
**2. FEDERAL SPECIFIC CLAUSES**  
**ATTACHMENT A-2**

- A. The Contractor agrees to comply with United States Department of Labor's (USDOL) regulations and issuances, and NYSOFA policies and procedures governing the Senior Community Service Employment Program (SCSEP). The Contractor agrees, and will require its contractors, if any, to agree to:
- 1) provide community service assignments only for eligible individuals and, to the extent possible, recruit necessary technical, administrative and supervisory personnel from among eligible individuals;
  - 2) provide community service assignments for eligible individuals in the county in which they reside or in nearby communities;
  - 3) assign eligible individuals to community service assignments in publicly owned and operated facilities and projects, or projects sponsored by organizations, other than political parties, exempt from taxation under the provisions of section 501(c)(3) of the Internal Revenue Code of 1954, except projects involving the construction, operation, or maintenance of any facility used or to be used as a place for sectarian religious instruction or worship;
  - 4) assure that no otherwise Title V qualified older person with a disability or perceived to have a disability shall, solely by reason of this disability, be excluded from participation in, be denied benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance. A person with a disability is defined as any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment. This includes alcoholism and drug addiction;
  - 5) provide physical and programmatic accessibility and reasonable accommodations for, and effective communications with, individuals with disabilities and not deny community service assignments to any person with a disability if reasonable accommodations can be made;
  - 6) contribute to the general welfare of the community in a manner that will:
    - a) result in an increase in employment opportunities over those opportunities which would otherwise be available,
    - b) not result in the displacement of currently employed workers (including partial displacement, such as a reduction in the hours of non-overtime work or wages or employment benefits), and



- c) not impair existing contracts for service or result in the substitution of federal funds in connection with work that would otherwise be performed;
- 7) not employ or continue to employ any participant to perform work which is the same or substantially the same as that performed by any other person who is on layoff;
- 8) utilize methods of recruitment and selection (including notifying the state employment security agency when vacancies occur) which will assure that the maximum number of eligible individuals will have an opportunity to participate in the project;
- 9) conduct training as may be necessary to make the most effective use of the skills and talents of participants, provide for the reasonable expense of individuals being trained, including reasonable compensation for time spent in training; and, wherever possible, obtain all training for participants at reduced or no cost to Title V from such sources as the host agency, Workforce Innovation and Opportunity Act (WIOA) and the Carl D. Perkins Vocational and Applied Technology Education Act.;
- 10) assure that safe and healthy conditions of work will be provided;
- 11) establish and administer the grant with the advice of persons competent in the field of service in which employment is being provided, and of persons who are knowledgeable with regard to the needs of older persons;
- 12) authorize payment for reasonable transportation costs of participants which may be incurred under the grant in accordance with 20 CFR Section 641.545;
- 13) assure that to the extent feasible, the needs of minority, limited English speaking, and Native American Indian eligible individuals are served, and individuals who have the greatest economic need, at least in proportion to their numbers in the geographic jurisdiction of the project and take into consideration their rates of poverty and unemployment based on the best available information;
- 14) authorize funds to be used, to the extent feasible, to include individuals participating in the project under the State Unemployment Insurance Plan;
- 15) coordinate activities with the local WIOA system and the Carl D. Perkins Act programs to ensure that project trainees can benefit from such cooperative activities as dual eligibility, shared assessments, training and referral.

B. If the federal-state guidelines are amended or revised, the Contractor will comply

with them or notify NYSOFA within thirty (30) days after promulgation of the amendments or revisions that it cannot so conform so that NYSOFA may take appropriate action, including contract termination, if necessary.

C. The Contractor agrees that it will comply with the grievance procedures established by NYSOFA for programs operated under Title V of the OAA. Such procedures comply with federal requirements and include:

- 1) An opportunity for the participant or applicant to respond either verbally or in writing to an action of the AAA, including filing a grievance;
- 2) An opportunity for an informal conference;
- 3) A prompt determination of the issue;
- 4) If an issue cannot be resolved to the satisfaction of the participant or applicant, the participant or applicant will be notified that they have the option of appealing the decision with NYSOFA and/or the USDOL; and

D. The Contractor agrees that it will comply with the non-discrimination and equal opportunity provisions of the Workforce Innovation and Opportunity Act outlined in 29 CFR Part 38. Such provisions include that:

- 1) The Contractor will not discriminate on the following bases:
  - Race;
  - Color;
  - Religion;
  - Gender;
  - Sexual orientation;
  - National origin;
  - Age (age is a valid requirement for SCSEP eligibility – no upper age limit can be imposed on program applicants or participants);
  - Disability;
  - Political affiliation or belief; and
  - Citizenship/status as a lawfully admitted immigrant authorized to work in the United States; or
  - His/Her participation in any WIOA Title I-financially assisted program or activity.
- 2) The Contractor will not discriminate in the following areas:
  - Deciding who will be admitted to SCSEP;
  - Providing opportunities in a program activity; or
  - Making employment decisions in such a program or activity.

- 3) The Contractor will comply with the Notice and Communication requirements of 29 CFR §38.34 through §38.40, including prominently displaying the equal opportunity notice in reasonable numbers and places; disseminating it in internal memoranda and other written or electronic communications; including it in the participant handbook; and making it available to each participant and making it a part of the participant's file.
- 4) The Contractor will comply with the Complaint Processing Procedures requirements of 29 CFR §38.69 through §38.97.

E. The Contractor agrees that it will:

- 1) comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act as they apply to hospital and educational employees of state and local governments; and,
- 2) it will otherwise compensate participants at a rate which is at least commensurate with the highest applicable minimum wage which is either the minimum wage applicable under the Federal Fair Labor Standards Act of 1938; the New York State minimum wage for the most nearly comparable covered employment, notwithstanding any exceptions which may otherwise apply; or the prevailing rate of pay for persons employed in similar public occupations by the same employer.

F. The Contractor agrees that it will establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties;

G. The Contractor agrees that it will give the USDOL, the Comptroller General, the Office of the State Comptroller and NYSOFA, through any authorized representative, the access to and the right to examine all records, books, papers or documents related to SCSEP; and,

H. The Contractor agrees that it will comply with the federal regulations governing grant administration for SCSEP as set forth in 20 CFR Part 641, 29 CFR Parts 95 through 99.

I. Program Income:

- 1) Program income is defined as any income earned by the Contractor during the contract period that is directly generated by an allowable activity supported by SCSEP funds or earned as a result of the award of SCSEP funds. Program income includes income earned from license fees and royalties for copyrighted material, patents, patent applications, trademarks, and inventions produced under an award. Costs of generating SCSEP

program income may be deducted from gross income received by the Contractor to determine SCSEP program income earned or generated provided these costs have not been charged to SCSEP.

- 2) Contractor agrees to add program income that is earned or generated during the contract period to the Federal and non-Federal funds committed to SCSEP and will use it to further the purposes of the program and in accordance with the terms and conditions of this contract. Contractor understands and agrees that program income may only be spent during the program year in which it was earned. If the program income was received after the program year ended, the program income must be spent in the program year it was received. Any program income earned and remaining at the end of the program year in which it was earned can only be spent in the subsequent program year. Contractor will remit to NYSOFA any unexpended program income not spent during the allowable time period, or if the Contractor does not continue to operate SCSEP through this contract.

J. Eligibility Criteria and Enrollment Priorities:

- 1) The Contractor through SCSEP will provide useful part-time community service assignments for unemployed low-income persons who are 55 years old or older while promoting transition to unsubsidized employment.
- 2) To be eligible for SCSEP the individual must be no less than 55 years of age, a resident of New York State, unemployed at the time of application and whose family income does not exceed 125% of the Federal Poverty Level.
- 3) The Contractor shall recertify the income eligibility of each trainee at least once each project year between July 1 and June 30 according to the schedule in this project agreement.

K. The Contractor or, the Contractor's sub-contractor, will recruit and select eligible individuals in sufficient numbers to fill all authorized slots. Enrollment priorities for filling all positions shall be to individuals with the following priority characteristics:

- 1) are 65 years of age or older;
- 2) have a disability;
- 3) have limited English proficiency or low literacy skills;
- 4) reside in a rural area;
- 5) are veterans (or, in some cases, spouses of veterans) for purposes of the Jobs for Veterans Act;
- 6) have low employment prospects;
- 7) have failed to find employment after using services provided through the One-Stop delivery system; or
- 8) are homeless or are at risk for homelessness

When determining the order in which to give enrollment priority, the Contractor will use the following order:

- 1) Persons who qualify as a veteran or a qualified spouse under the Jobs for Veterans Act and possess at least one of the other priority characteristics;
- 2) Persons who qualify as a veteran or a qualified spouse under the Jobs for Veterans Act and do not possess any other of the priority characteristics;
- 3) Persons who do not qualify as a veteran or qualified spouse under the Jobs for Veterans Act and possess at least one of the other priority characteristics.

L. The Contractor will offer SCSEP participants the opportunity to take a physical examination within 60 days of enrollment and annually in accordance with 29 CFR §641.565.

M. Orientation requirements:

- 1) The Contractor shall provide orientation to the SCSEP participant as soon as practicable after determination of eligibility. The orientation shall include information on:
  - Project goals and objectives;
  - Participant rights and responsibilities;
  - Community service assignments;
  - Training opportunities;
  - Available supportive services;
  - Availability of free physical examinations;
  - Policies and procedures;
  - Documentation requirements;
  - Holiday and sick leave;
  - Assessment process;
  - Development and implementation of IEPs;
  - Evaluation of participant progress;
  - Health and safety issues related to participant's assignment;
  - Role of supervisors and host agencies;
  - Maximum individual duration policy, including the possibility of a waiver;
  - Termination policy; and
  - Grievance procedure.
- 2) The Contractor shall provide orientation to those individuals who will supervise SCSEP participants at the host agencies.

N. The Contractor shall assess each new participant to determine the most suitable community service assignment for the individual and to identify appropriate employment, training and community service objectives for each individual. The assessment shall be made in partnership with the new participant in accordance with 29 CFR §641.535. Assessments shall be done at least two times during a

twelve month period to determine the SCSEP participant's potential for transition to unsubsidized employment. Assessments shall be documented and made a part of the participant's permanent record. Assessments and service strategies or individual employment plans of a participant, prepared under the Workforce Innovation and Opportunity Act may be substituted for one prepared by the Contractor.

- O. The Contractor shall use the assessment or reassessment as a basis for developing or amending an Individual Employment Plan (IEP). The IEP shall be developed in partnership with the SCSEP participant to reflect the needs, interests and desires of the participant (29 CFR §641.535). The Contractor shall review the IEP at least twice in a 12-month period.
- P. The Contractor will complete and document follow up for SCSEP participants who are placed in unsubsidized employment that includes the number of hours the participant worked and wages earned at least once per three (3) month period of unsubsidized placement for one year.
- Q. The Contractor shall ensure that all SCSEP participants, including those hired by contractors, receive all the fringe benefits as may be required by law and will ensure compliance with NYSOFA's wage and fringe benefits policy.
- R. The Contractor shall ensure that all reporting requirements are completed in accordance with NYSOFA requirements.
- S. Durational Limits:
  - 1) The Contractor will limit participation in SCSEP to no longer than forty-eight (48) months unless NYSOFA grants an extension for a participant that is frail and/or over the age of 75 years.
  - 2) The Contractor will strive to maintain an average participation cap for all participants of twenty-seven (27) months in order to meet the aggregate statewide goal for all NYSOFA sub-recipients of 27 months.
- T. The Contractor shall employ reasonable means to place each SCSEP participant into unsubsidized employment. The Contractor will develop a system to transition participants to unsubsidized employment or other assistance before each participant's maximum enrollment duration has expired.
- U. The Contractor will provide a 30-day written notice for all terminations that states the reason for termination and informs the participants of grievance procedures and right to appeal. The Contractor will maintain written termination policies in effect and provide to participants at enrollment for:
  - 1) Provision of false eligibility information by the participant
  - 2) Incorrect initial eligibility determination at enrollment
  - 3) Income ineligibility determined at recertification

- 4) Participant has reached individual durational limit
- 5) Participant has become employed while enrolled
- 6) IEP-related termination
- 7) Cause (must be approved by NYSOFA prior to implementation)

V. The Contractor will manage over-enrollment to minimize impact on participants and avoid layoffs.

W. The Contractor will ensure full implementation and monitoring of requirements for customer satisfaction surveys, including participant, host agency and employer surveys.

X. The Contractor will develop a written plan for both disaster response and recovery so that SCSEP may continue to operate and provide services under emergency circumstances.

Y. The Contractor will provide supportive services, as needed, to help participants participate in their community service assignment and to obtain and retain unsubsidized employment. The Contractor will establish criteria to assess the need for supportive services and to determine when participants will receive supportive services, including after obtaining unsubsidized employment.

**PART III: APPLICATION**  
**1. APPLICATION CHECKLIST**

The Application Checklist is a comprehensive checklist of all pieces of the application and includes items that are part of the Application Forms Menu in Grants Gateway as well as additional documents. Please see the Application Instructions, located in the Application Forms Menu under Application Information, for more details on how to complete specific sections.

The following items are to be completed directly in Grants Gateway:

- ☐ Expenditure Based Budget, Attachment B-1 (Part III-2, Attachment B)
- ☐ Program Work Plan (Part III-3, Attachment C)
- ☐ Answers to Program Specific Questions (Part III-7)

The following items are to be completed and then uploaded in the Pre-Submission Uploads section of Grants Gateway:

- ☐ Supplementary Budget (Part III-4, Attachment E)
- ☐ Subcontractor Budget (if applicable) (Part III-5, Attachment E-1)
- ☐ Supplementary Program Work Plan (Part III-6, Attachment W)



**PART III**  
**2. EXPENDITURE BASED BUDGET**  
**ATTACHMENT B**

The Expenditure Based Budget can be accessed and must be completed via the New York State Grants Gateway at the following web address (and upon user log in): <https://grantsgateway.ny.gov>. The total funding for the region should be placed on line 2(f) – other. Do not complete all budget categories. A detailed budget breakdown will be provided in Attachment E – Supplementary Budget. For instructions on completing the budget documents, see the Application Instructions in the Forms Menu of your application in Grants Gateway.

Both the Expenditure Based Budget (Attachment B) and the Supplementary Budget (Attachment E) are required to be completed and submitted as part of the application.

**PART III**  
**3. PROGRAM WORK PLAN**  
**ATTACHMENT C**

The Program Work Plan can be accessed and must be completed via the New York State Grants Gateway at the following web address (and upon user log in): [https://grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/goportal.aspx](https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx). All applicants must write the following attestation in the Project Summary section of the Work Plan Overview Form in the Forms Menu of the application in Grants Gateway.

I have read Attachment W – Supplementary Program Work Plan  
and agree to carry out all activities found therein.

The prescribed work plan that details required contract activities is available as Attachment W – Supplementary Program Work Plan and can be found in the Pre-Submission Uploads section of the Forms Menu in Grants Gateway. For instructions on completing the Work Plan section of the Forms Menu, see the Application Instructions in the Forms Menu of your application in Grants Gateway.

Applicants are also required to complete the Contact information for Contractor's designee to receive notice section at the top of the Supplementary Program Work Plan (Attachment W) and upload it to the Pre-Submission Uploads section of the Forms Menu in Grants Gateway. **This contact information for "Contractor's Designee" in Attachment W is solely for identifying to whom notices to the contractor will be sent during the term of a contract awarded through the RFA and fully executed by the parties. NYSOFA will not use the information to contact the applicant regarding anything related to the RFA process and the application itself.**

**PART III**  
**4. SUPPLEMENTARY BUDGET**  
**ATTACHMENT E**

Attachment E must be completed and uploaded as part of your application. It can be found in the Pre-Submission Uploads section in the Forms Menu of your application in Grants Gateway.

Contractor: \_\_\_\_\_

Funding Period: July 1, 2018 - June 30, 2019 Contract Number: \_\_\_\_\_

**MINIMUM ENROLLEE WAGES & FRINGE BENEFITS** \_\_\_\_\_ **MAXIMUM ADMINISTRATION** \_\_\_\_\_

Budget Category	Enrollee Wages/ Fringe Benefits	Administration	Program/ Other Costs	Total Costs
1. Personnel				
2. Fringe Benefits				
3. Equipment				
4. Travel				
5. Maintenance & Operations				
6. Other Expenses				
7. Subcontractors/Consultants				
8. Total Budget (sum of Lines 1 - 7)				
9. Less: Program Income				
10. Net Budget (Line 8 minus Line 9)				
11. Less: Matching Funds				
12. Federal Funds Requested				

## ATTACHMENT - E - SUPPLEMENTARY BUDGET

Contractor: \_\_\_\_\_

1. Personnel					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Enrollee Wages/ Fringe	Admin	Program/ Other Costs	Charged to Program
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.					
<b>TOTAL</b>					

<b>2. Fringe Benefits</b> - List the Total Fringe Benefits in the space provided				
<b>TOTAL</b>				

## ATTACHMENT - E - SUPPLEMENTARY BUDGET

Contractor: \_\_\_\_\_

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment. Contractors must

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items and Cost			
			<b>TOTAL</b>	

**Amount of Equipment Costs Charged to:**

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

### 4. Travel

Mileage - indicate the rate per mile--->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
			<b>TOTAL</b>

**Amount of Travel Costs Charged to:**

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

## ATTACHMENT - E - SUPPLEMENTARY BUDGET

Contractor: \_\_\_\_\_

<b>5. Maintenance and Operations</b>			
Rent/Utilities: Include information below for rental property			
Location/Address: _____		Owner: _____	
Monthly Rental: _____	x	_____	
amt.		% chargeable	
		x	
		# months	= _____
Utilities: _____			
Janitorial Services: _____			
Facility Maintenance & Minor Repairs: _____			
<b>Sub-Total</b>			
Telephone: _____			<b>Sub-Total</b>
Postage: _____			<b>Sub-Total</b>
Supplies: _____ (Supplies may include office, program and maintenance supplies)			<b>Sub-Total</b>
Printing & Photocopying _____			<b>Sub-Total</b>
Meals, Food, Snacks _____			<b>Sub-Total</b>
Equipment Maintenance & Repair: (describe equipment and list amount)			
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
<b>Sub-Total</b>			
		<b>TOTAL</b>	

**Amount of Maintenance and Operations Charged to:**

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.		
		<b>TOTAL</b>

**Amount of Other Expenses Charged to:**

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

## ATTACHMENT E SUPPLEMENTARY BUDGET

Contractor: \_\_\_\_\_

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column

Provider/Type of Service	If applicable		Amt Paid to Organization (A)	Amt Used as Match (B)	Total (A+B)
	Unit Rate	Number of Units			
				<b>TOTAL</b>	

Amount of Subcontractors/Consultants Charged to:

Enrollee Wages/ Fringe Benefits \_\_\_\_\_ Administration: \_\_\_\_\_ Program/ Other Costs: \_\_\_\_\_

**8. Total Budget (sum of Lines 1 - 8)** \_\_\_\_\_

**9. Program Income (if applicable):** \_\_\_\_\_

Amount of Net Total Program Income- Used for :

Administration: \_\_\_\_\_ Program/Other Costs: \_\_\_\_\_

**10. Net Budget (Line 8 minus Line 9)** \_\_\_\_\_

**11. LOCAL MATCHING FUNDS** - List the source of funds and the amount from each source,

**Note: All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)**

SOURCE	Check if In-Kind	AMOUNT
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<b>TOTAL MATCH</b>	

Amount of Local Matching Funds Charged to:

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

**12. Federal Funds Requested (Line 10 minus Line 11)** \_\_\_\_\_

**PART III**  
**5. SUBCONTRACTOR BUDGET**  
**ATTACHMENT E-1**

A subcontractor budget must be completed for any subcontractors receiving \$5,000 or more in State SCSEP funds.

Subcontractor: \_\_\_\_\_

Funding Period: \ July 1, 2018 - June 30, 2019

<b>Budget Category</b>	<b>Enrollee Wages/ Fringe Benefits</b>	<b>Administration</b>	<b>Program/ Other Costs</b>	<b>Total Costs</b>
1. Personnel				
2. Fringe Benefits				
3. Equipment				
4. Travel				
5. Maintenance & Operations				
6. Other Expenses				
7. Subcontractors/Consultants				
8. Total Budget (sum of Lines 1 - 7)				



## SUBCONTRACTOR BUDGET

**Subcontractor:** \_\_\_\_\_

## 1. Personnel

Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Enrollee Wages/ Fringe	Admin	Program/ Other Costs	Charged to Program
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
N					
T					
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate.					
TOTAL					

**2. Fringe Benefits** - List the Total Fringe Benefits in the space provided

	TOTAL				
--	-------	--	--	--	--

## SUBCONTRACTOR BUDGET

Subcontractor: \_\_\_\_\_

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment. Prior approval m

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items and Cost			
			<b>TOTAL</b>	

Amount of Equipment Costs Charged to:

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

### 4. Travel

Mileage - indicate the rate per mile-->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
			<b>TOTAL</b>

Amount of Travel Costs Charged to:

Administration \_\_\_\_\_ Program/Other Costs \_\_\_\_\_

## SUBCONTRACTOR BUDGET

**Subcontractor:** \_\_\_\_\_

<b>5. Maintenance and Operations</b>				
Rent/Utilities: Include information below for rental property				
Location/Address: _____		Owner: _____		
Monthly Rental:	_____	x	_____	
	amt.		% chargeable	
		x	_____	
			# months	
		=		\$ -
Utilities:	_____			
Janitorial Services:	_____			
Facility Maintenance & Minor Repairs:	_____			
<b>Sub-Total</b>				
Telephone:				<b>Sub-Total</b>
Postage:				<b>Sub-Total</b>
Supplies: (Supplies may include office, program and maintenance supplies)				<b>Sub-Total</b>
Printing & Photocopying				<b>Sub-Total</b>
Meals, Food, Snacks				<b>Sub-Total</b>
Equipment Maintenance & Repair: (describe equipment and list amount)				
_____		_____		
_____		_____		
_____		_____		
<b>Sub-Total</b>				
				<b>TOTAL</b>

**Amount of Maintenance and Operations Charged to:**

**Administration** \_\_\_\_\_ **Program/Other Costs** \_\_\_\_\_

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.	
	<b>TOTAL</b>

**Amount of Other Expenses Charged to:**

**Administration** \_\_\_\_\_ **Program/Other Costs** \_\_\_\_\_

## SUBCONTRACTOR BUDGET

**Subcontractor:** \_\_\_\_\_

**7. Subcontractors/Consultants:** If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider	Type of Service	If applicable		Amount
		Unit Rate	Number of Units	
TOTAL				

**Amount of Subcontractors/Consultants Charged to:**

Enrollee Wages/ Fringe Benefits	Administration	Program/Other Costs
------------------------------------	----------------	------------------------

<b>8. Total Budget (sum of Lines 1 - 7)</b>		
---	--	--

**PART III**  
**6. SUPPLEMENTARY PROGRAM WORK PLAN**  
**ATTACHMENT W**

**Contact information for Contractor's designee to receive notice:**

Name:  
Address:  
Telephone Number:  
E-mail Address:

**Goal of SCSEP:** To foster and promote useful part-time work experiences in community service activities for unemployed, low income individuals 55 years and older, as well as provide employment opportunities to these eligible individuals in the communities in which they live.

<b>Objective</b>	<b>Measurable Outcomes</b>	<b>Deliverables</b>	<b>Due Date</b>
<i>Entered Employment:</i> Assist participants in gaining unsubsidized employment upon exit of SCSEP.	51% of participants will gain unsubsidized employment upon exit of SCSEP.	All required information related to a participant's exit from SCSEP will be entered in SPARQ.	As needed based on SPARQ quarterly requirements.
<i>Retention:</i> Provide supportive follow up after a participant has exited SCSEP to assist them in retaining their unsubsidized employment. This may include the participant and/or the employer.	80% of participants who entered employment will retain their unsubsidized employment for at least a year following their exit of SCSEP.	Employer and/or participant follow up will occur according to the SCSEP Data Collection Handbook, Form Heading 8, Topics 11-19.	According to the SCSEP Data Collection Handbook, Form Heading 8, Topic 17-18.
<i>Average Earnings:</i> Assist participants in gaining unsubsidized employment that provides earnings at or above their SCSEP wages.	Of the 80% of participants who entered employment, they will achieve average earnings of \$8,000 per year.	Employer and/or participant follow up will occur according to the SCSEP Data Collection Handbook, Form Heading 8, Topics 11-19.	According to the SCSEP Data Collection Handbook, Form Heading 8, Topic 17-18.
<i>Service Level:</i> Enroll eligible individuals in SCSEP according to the number of modified positions allotted to the program.	100% of modified positions as defined by region will be filled by eligible participants.	As indicated in SPARQ through reported community service hours.	As needed based on SPARQ quarterly requirements.
<i>Community Service:</i> Place participants in meaningful community service assignments that will assist them in gaining the skills necessary to obtain unsubsidized employment.	Participants will perform at least 80% of allowable community service hours funded by the grant.	All required information related to a participant's community service hours will be entered in SPARQ.	As needed based on SPARQ quarterly requirements.
<i>Most in Need:</i> Recruit and prioritize enrollment in SCSEP for those who have at least two or more of the most in need barriers to employment.	The program will maintain an overall average of 2.75 barriers to employment.	All required information related to barriers to employment will be entered in SPARQ.	As needed based on SPARQ quarterly requirements.

### **PART III**

## **7. PROGRAM SPECIFIC QUESTIONS**

#### *General Information – Not Scored*

- A. Does your agency operate any authorized positions through one of the National Grantees? If yes, which one and in what counties?
- B. Do you plan to contract out any portion of the work covered by this RFA? If yes, what role will your agency play and what role will the contracted agency play? Also, if it is already known to what entity, please identify the contracted agency or agencies.

Please note: The applicant agency must directly manage and oversee the program, but, with approval from NYSOFA, may contract out a portion of the services directly provided to participants (e.g. contract out the direct provision of the authorized positions in a particular county in the region they are selected to operate).

#### *Applicant Experience – 12 Maximum Points*

1. Describe any experience your agency has administering a WIA/WIOA Title I financially assisted program. Please include the specific program(s) you have experience in as well as the number of years of experience. Make sure to mention any experience conducting assessments and creating Individualized Employment Plans (IEPs).
2. Describe any experience specifically working with older adults to obtain unsubsidized employment.

#### *Regional Overview – 8 Maximum Points*

3. Provide an overview of the economic conditions and employment outlook of the region for which you are applying. Include information on:
  - The socio-economic characteristics of the SCSEP service population in the proposed region and the barriers to employment this population faces;
  - Any high-demand industries or occupations you will target for employment opportunities for SCSEP participants; and
  - The community service needs of the region and identify the community service positions that you will target for SCSEP participants.

#### *Organizational Structure and Program Management – 27 Maximum Points*

4. Describe your agency's organizational structure and provide an organizational chart for your agency. If you will be contracting out any portion of the work

covered by this RFA, make sure to include how your agency's organizational structure relates to the contractor(s).

5. State how your agency will manage program operations, including its ability to operate a multi-county program. Include any infrastructure and staff you have in other counties. Please include how the SCSEP program staff will work with participants in various parts of the region.
6. Describe your agency's capacity for providing dedicated staff time for key positions to the program, including who will be designated as the SCSEP Director. What experience and/or qualifications do/will these staff possess? Also, identify any additional staff that will be working on SCSEP and in what capacity.
7. Describe the process for communicating and reporting between the SCSEP Director and other staff involved in the operation of the program, including any contractors.
8. Describe how your agency will carry out the fiscal operations related to the program, including a system to track estimated and actual enrollment and estimated and actual participant wages and fringe benefits. Is there staff dedicated to fiscal operations? How will you ensure that all grant funds are spent throughout the program year in an efficient manner?
9. Describe your agency's capacity to collect and manage data in a way that ensures consistent, accurate, and timely reporting as required by USDOL. Please include any past and/or current use of SCSEP Performance and Results QPR System (SPARQ) or a similar performance tracking system.

*Partnerships and Employer Relations – 15 Maximum Points*

10. Identify and describe the relationships you have established with key partners (e.g. employers, educational institutions, One-Stops, Area Agencies on Aging, etc.) to support SCSEP. Detail how your agency and the partnering entities will work together. Explain why these partners are appropriate and how these partnerships will be leveraged to support SCSEP participants' employment and community service assignment goals.
11. Explain how you will engage employers to determine their needs and how you will help them hire SCSEP participants.
12. Describe your strategy to recruit host agencies to serve as community service training sites for SCSEP participants that prepare them for opportunities in in-demand industries and careers and assist them in becoming job-ready.

*Participant Services – 18 Maximum Points*

13. Describe your plan to recruit SCSEP participants and the roles that the One-Stop and any other partners will play in the recruitment of participants.
14. Detail special efforts that will be made to recruit SCSEP participants that possess one or more priority characteristics. Priority characteristics include individuals who:
  - are 65 years of age or older;
  - have a disability;
  - have limited English proficiency or low literacy skills;
  - reside in a rural area;
  - are veterans (or, in some cases, spouses of veterans) for purposes of the Jobs for Veterans Act;
  - have low employment prospects;
  - have failed to find employment after using services provided through the One-Stop delivery system; or
  - are homeless or are at risk for homelessness.
15. Explain how your agency will overcome the barriers to employment identified in the response to question 3 in order to find SCSEP participants suitable community service assignments and assist them in obtaining unsubsidized employment.
16. State your agency's ability to provide supportive services (e.g. transportation; health and medical services; special job-related personal counseling; incidentals such as work shoes, badges, uniforms, tools, etc.) necessary to enable participants to engage in employment related activities.

*Budget – 20 Maximum Points (Question 17 will be scored along with the budget pages for a total of 20 points)*

17. Describe your agency's ability to maintain a continuity of funding and leverage additional resources to support the program, including its ability to provide matching funds. NYSOFA requests that applicants provide non-federal match to help with the matching requirement of the program (see Part I-7 for more information on matching funds).



**PART IV: ADDITIONAL REQUIRED DISCLOSURE DOCUMENTS**  
**1. NONDISCRIMINATION IN EMPLOYMENT IN NORTHERN IRELAND:**  
**MACBRIDE FAIR EMPLOYMENT PRINCIPLES**

In accordance with section 165 of the State Finance Law, the bidder, by submission of this bid certifies that it or any individual or legal entity in which the bidder holds a 10% or greater ownership interest, or any individual or legal entity that holds a 10% or greater ownership in the bidder, either: (answer yes or no to one or both of the following, as applicable),

(1) has business operations in Northern Ireland;

Yes\_\_\_\_ or No\_\_\_\_

If yes:

(2) shall take lawful steps in good faith to conduct any business operations that it has in Northern Ireland in accordance with the MacBride Fair Employment Principles relating to nondiscrimination in employment and freedom of workplace opportunity regarding such operations in Northern Ireland, and shall permit independent monitoring of their compliance with such Principles.

Yes\_\_\_\_ or No\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

## **PART IV**

### **2. VENDOR RESPONSIBILITY QUESTIONNAIRE**

The Office of the State Comptroller (OSC) maintains the VendRep system, which allows business entities (vendors) to enter and maintain their Vendor Responsibility Questionnaire (VRQ) information in a secure, centralized database. It is recommended that all potential vendors prepare their VRQ on-line as follows: [http://www.osc.state.ny.us/vendrep/forms\\_vendor.htm](http://www.osc.state.ny.us/vendrep/forms_vendor.htm) and do so at the time of application submission. For direct VendRep user assistance, the OSC Help Desk may be reached at 866-370-4672 or 518-408-4672, or by e-mail at [helpdesk@osc.state.ny.us](mailto:helpdesk@osc.state.ny.us).

If a potential vendor opts to use the paper copy, the form is found at [http://www.osc.state.ny.us/vendrep/forms\\_vendor.htm](http://www.osc.state.ny.us/vendrep/forms_vendor.htm) on the OSC website.

## PART IV

### 3. NON-COLLUSIVE BIDDING CERTIFICATION

**(Required by: Section 139-D of the NY State Finance Law)**

SECTION 139-D, Statement of Non-Collusion in bids to the State:

**BY SUBMISSION OF THIS BID, BIDDER AND EACH PERSON SIGNING ON BEHALF OF BIDDER CERTIFIES, AND IN THE CASE OF JOINT BID, EACH PARTY THERETO CERTIFIES AS TO ITS OWN ORGANIZATION, UNDER PENALTY OF PERJURY, THAT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF:**

[1] The prices of this bid have been arrived at independently, without collusion, consultation, communication, or agreement, for the purposes of restricting competition, as to any matter relating to such prices with any other Bidder or with any competitor;

[2] Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by the Bidder prior to opening, directly or indirectly, to any other Bidder or to any competitor; and

[3] No attempt has been made or will be made by the Bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

**A BID SHALL NOT BE CONSIDERED FOR AWARD NOR SHALL ANY AWARD BE MADE WHERE [1], [2], [3] ABOVE HAVE NOT BEEN COMPLIED WITH; PROVIDED HOWEVER, THAT IF IN ANY CASE THE BIDDER(S) CANNOT MAKE THE FOREGOING CERTIFICATION, THE BIDDER SHALL SO STATE AND SHALL FURNISH BELOW A SIGNED STATEMENT WHICH SETS FORTH IN DETAIL THE REASONS THEREFORE:**

[AFFIX ADDENDUM TO THIS PAGE IF SPACE IS REQUIRED FOR STATEMENT.]

*Subscribed to under penalty of perjury under the laws of the State of New York, this \_\_\_\_\_ day of \_\_\_\_\_, 2017 as the act and deed of said corporation or partnership.*

Name of Authorized Representative: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Federal ID: \_\_\_\_\_

## **PART V: ATTACHMENTS**

### **1. PREQUALIFICATION REQUIREMENTS**

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the [Grants Reform Website](#).

**Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date of 04:00 PM on 12/09/16 cannot be evaluated. Such applications will be disqualified from further consideration.**

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Reform Website details the requirements and an [online tutorial](#) are available to walk users through the process.

#### **1) Register for the Grants Gateway.**

- On the Grants Reform Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username please email [grantsreform@budget.ny.gov](mailto:grantsreform@budget.ny.gov). If you do not know your Password please click the [Forgot Password](#) link from the main log in page and follow the prompts.

#### **2) Complete your Prequalification Application.**

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Applications.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at [grantsreform@budget.ny.gov](mailto:grantsreform@budget.ny.gov).

#### **3) Submit Your Prequalification Application**

- After completing your Prequalification Application, click the ***Submit Document Vault*** Link located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.
- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

**Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity**

## PART V

## 2. ENCOURAGING USE OF NEW YORK STATE BUSINESSES IN CONTRACT PERFORMANCE

New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services, and technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the requirements for the contract. Such partnering may be as subcontractors, suppliers, protégés, or other supporting roles.

Bidders/proposers need to be aware that all authorized users of their contract will be strongly encouraged, to the maximum extent practical and consistent with legal requirements, to use responsible and responsive New York State businesses in purchasing commodities that are of equal quality and functionality and in utilizing services and technology. Furthermore, bidder/proposers are reminded that they must continue to utilize small, minority and women-owned businesses, consistent with current State law.

Utilizing New York State businesses in State contracts will help create more private sector jobs, rebuild New York's infrastructure, and maximize economic activity to the mutual benefit of the contractor and its New York State business partners. New York State businesses will promote the contractor's optimal performance under the contract, thereby fully benefiting the public sector programs that are supported by associated procurements.

Public procurements can drive and improve the State's economic engine through promotion of the use the use of New York businesses by its contractors. The State therefore expects bidders/proposers to provide maximum assistance to New York businesses in their use of the contract. The potential participation by all kinds of New York businesses will deliver great value to the State and its taxpayers.

Bidders/proposers can demonstrate their commitment to the use of New York state businesses by responding to the question below:

Will New York State Businesses be used in the performance of this contract?	Yes	No

If yes, identify New York State businesses that will be used and attach identifying information.

## PART V

### 3. MWBE UTILIZATION PLAN (MWBE 103)

INSTRUCTIONS: This form must be submitted with any bid, proposal, or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award. This Utilization Plan must contain a detailed description of the supplies and/or services to be provided by each certified Minority and Women-owned Business Enterprise (MWBE) under the contract. Attach additional sheets if necessary. Utilization of certified minority and woman owned business enterprises for non-commercially useful functions may not be counted toward utilization of certified minority and woman owned business enterprises identified in this utilization plan.

**Offeror's Name:**

**Address:**

**City, State, Zip Code:**

**Telephone No.:**

**Region/Location of Work:**

**Federal Identification No.:**

**Solicitation No.:**

**Project No.:**

**MWBE Goals in the Contract:** MBE        %    WBE        %

1. Certified MWBE Subcontractors/Suppliers Name, Address, Email Address, Telephone No.	2. Classification	3. Federal ID No.	4. Detailed Description of Work (Attach additional sheets, if necessary)	5. Dollar Value of Subcontracts/Supplies/Services and intended performance dates of each component of the contract.
A.	NYS ESD CERTIFIED <input type="checkbox"/> MBE <input type="checkbox"/> WBE			
B.	NYS ESD CERTIFIED <input type="checkbox"/> MBE <input type="checkbox"/> WBE			

**6. IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, OFFEROR MUST SUBMIT A REQUEST FOR WAIVER FORM (MWBE 104).**

<b>PREPARED BY (Signature):</b> <b>DATE:</b>  <b>NAME AND TITLE OF PREPARER (Print or Type):</b> SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE MWBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 143, AND THE ABOVE-REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND POSSIBLE TERMINATION OF YOUR CONTRACT.	<b>TELEPHONE NO.:</b>	
	<b>EMAIL ADDRESS:</b>	
	<b>FOR MWBE USE ONLY</b>	
	<b>REVIEWED BY:</b>	<b>DATE:</b>
<b>PLEASE SUBMIT TO:</b> NYS Office for the Aging, 2 ES Plaza, Albany, NY 12223-1251  <b>MWBE 103 (Revised 9/12)</b>	<b>UTILIZATION PLAN APPROVED:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO    Date: _____ <b>Contract No.:</b> _____ <b>Project No. (if applicable):</b> _____  <b>Contract Award Date:</b> _____ <b>Estimated Date of Completion:</b> _____ <b>Amount Obligated Under the Contract:</b> _____ <b>Description of Work:</b> _____ <b>NOTICE OF DEFICIENCY ISSUED:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO    Date: _____  <b>NOTICE OF ACCEPTANCE ISSUED:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO    Date: _____	

**PART V**  
**4. EEO STAFFING PLAN (MWBE 101)**

<b>Solicitation No:</b>	<b>Reporting Entity:</b>	<b>Report includes Contractor's/Subcontractor's:</b> <input type="checkbox"/> Work force to be utilized on this contract <input type="checkbox"/> Total work force
<b>Offeror's Name:</b>		<input type="checkbox"/> Offeror <input type="checkbox"/> Subcontractor <b>Subcontractor's Name</b> _____
<b>Offeror's Address:</b>		

Enter the total number of employees for each classification in each of the EEO-Job Categories identified

EEO-Job Category	Total Work force	Work force by Gender		Work force by Race/Ethnic Identification													
		Total Male (M)	Total Female (F)	White (M) (F)		Black (M) (F)		Hispanic (M) (F)		Asian (M) (F)		Native American (M) (F)		Disabled (M) (F)		Veteran (M) (F)	
Officials/Administrators																	
Professionals																	
Technicians																	
Sales Workers																	
Office/Clerical																	
Craft Workers																	
Laborers																	
Service Workers																	
Temporary /Apprentices																	
Totals																	

<b>PREPARED BY (Signature):</b>	<b>TELEPHONE NO:</b>	<b>DATE:</b>
	<b>EMAIL ADDRESS:</b>	
<b>NAME AND TITLE OF PREPARER (Print or Type):</b>		Submit completed with bid or proposal to: NYS Office for the Aging, 2 ESP, Albany, NY 12223-1251 MWBE 101 (Rev 9/12)

**General instructions:** All Offerors and each subcontractor identified in the bid or proposal must complete an EEO Staffing Plan (MWBE 101) and submit it as part of the bid or proposal package. Where the work force to be utilized in the performance of the State contract can be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form only for the anticipated work force to be utilized on the State contract. Where the work force to be utilized in the performance of the State contract cannot be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form for the contractor's and/or subcontractor's total work force.

**Instructions for completing:**

Enter the Solicitation number that this report applies to along with the name and address of the Offeror.

Check off the appropriate box to indicate if the Offeror completing the report is the contractor or a subcontractor.

Check off the appropriate box to indicate work force to be utilized on the contract or the Offerors' total work force.

Enter the total work force by EEO job category.

Break down the anticipated total work force by gender and enter under the heading 'Work force by Gender'

Break down the anticipated total work force by race/ethnic identification and enter under the heading 'Work force by Race/Ethnic Identification'. Contact the NYSOFA staff person designated in the solicitation if you have any questions.

Enter information on disabled or veterans included in the anticipated work force under the appropriate headings.

Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in the designated boxes.

**RACE/ETHNIC IDENTIFICATION**

Race/ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. For the purposes of this form, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. However, no person should be counted in more than one race/ethnic group. The race/ethnic categories for this survey are:

**WHITE:** (Not of Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**BLACK:** A person, not of Hispanic origin, who has origins in any of the black racial groups of the original peoples of Africa.

**HISPANIC:** A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

**ASIAN & PACIFIC:** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.

**ISLANDER**

**NATIVE INDIAN (NATIVE):** A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal.

**AMERICAN/ ALASKAN (NATIVE):** Affiliation or community recognition.

**OTHER CATEGORIES:**

**DISABLED INDIVIDUAL:** Any person who: has a physical or mental impairment that substantially limits one or more major life activity(ies), has a record of such an impairment; or is regarded as having such an impairment.

**VIETNAM ERA VETERAN:** A veteran who served at any time between and including January 1, 1963 and May 7, 1975.

**GENDER:**      **Male**      **or**      **Female**



**PART V**  
**5. MWBE/EEO POLICY STATEMENT (MWBE 100)**

**MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISES – EQUAL  
EMPLOYMENT OPPORTUNITY POLICY STATEMENT  
FOR CONTRACTORS OF THE NEW YORK STATE OFFICE FOR THE AGING**

**MWBE AND EEO POLICY STATEMENT**

I, \_\_\_\_\_, the (awardee/contractor) agree to adopt the following policies with respect to the project being developed or services rendered at \_\_\_\_\_

**MWBE**

This organization will and will cause its contractors and subcontractors to take good faith actions to achieve the MWBE contract participation goals set by the State for that area in which the State-funded project is located, by taking the following steps:

- (1) Actively and affirmatively solicit bids for contracts and subcontracts from qualified State certified MBEs or WBEs, including solicitations to MWBE contractor associations.
- (2) Request a list of State-certified MWBEs from NYSOFA and solicit bids from them directly.
- (3) Ensure that plans, specifications, request for proposals and other documents used to secure bids will be made available in sufficient time for review by prospective MWBEs.
- (4) Where feasible, divide the work into smaller portions to enhance participation by MWBEs and encourage the formation of joint ventures and other partnerships among MWBE contractors to enhance their participation.
- (5) Document and maintain records of bid solicitation, including those to MWBEs and the results thereof. Contractor will also maintain records of actions that its subcontractors have taken toward meeting MWBE contract participation goals.
- (6) Ensure that progress payments to MWBEs are made on a timely basis so that undue financial hardship is avoided, and that bonding and other credit requirements are waived or appropriate alternatives developed to encourage MWBE participation.

**EEO**

(a) This organization will not discriminate against any employee or applicant for employment because of race, creed, color, national origin, sex, age, disability or marital status, will undertake or continue existing programs of affirmative action to ensure that minority group members are afforded equal employment opportunities without discrimination, and shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on state contracts.

(b) This organization shall state in each solicitation or advertisement for employees that in the performance of the State contract all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.

(c) At the request of NYSOFA this organization shall request each employment agency, labor union, or authorized representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of this organization's obligations herein.

(d) The Contractor shall comply with the provisions of the Human Rights Law, all other State and Federal statutory and constitutional non-discrimination provisions. The Contractor and subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

(e) This organization will include the provisions of sections (a) through (d) of this policy statement in every subcontract in such a manner that the requirements of the subdivisions will be binding upon each subcontractor as to work in connection with the State contract.

Adopted this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

By: \_\_\_\_\_

Print: \_\_\_\_\_ Title: \_\_\_\_\_

**Contractor's Minority Business Enterprise Liaison**

\_\_\_\_\_ is designated as the Contractor's Minority Business Enterprise (Name of Designated Liaison)

Liaison responsible for administering the Minority and Women-Owned Business Enterprises-Equal Employment Opportunity (MWBE-EEO) program.

**MWBE Contract Goals**

\_\_\_\_ 30 \_\_\_\_ % Minority and Women's Business Enterprise Participation

\_\_\_\_ % Minority Business Enterprise Participation

\_\_\_\_ % Women's Business Enterprise Participation

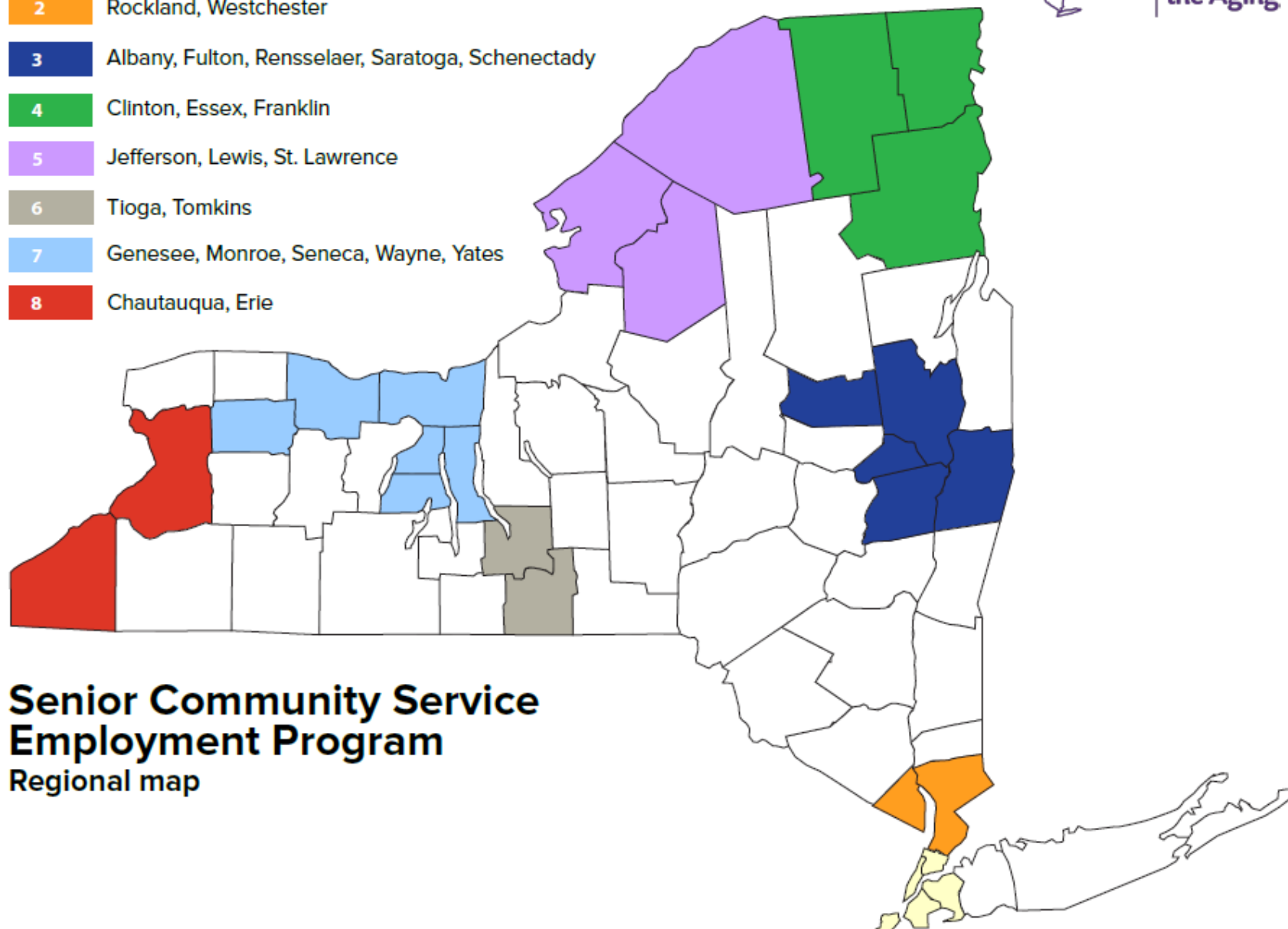
\_\_\_\_\_  
(Authorized Representative)

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**PART VI: APPENDICIES**  
**APPENDIX 1**  
**REGIONAL MAP**

- |          |   |
|----------|---|
| <b>1</b> | Bronx, Kings, New York, Queens, Richmond          |
| <b>2</b> | Rockland, Westchester                             |
| <b>3</b> | Albany, Fulton, Rensselaer, Saratoga, Schenectady |
| <b>4</b> | Clinton, Essex, Franklin                          |
| <b>5</b> | Jefferson, Lewis, St. Lawrence                    |
| <b>6</b> | Tioga, Tomkins                                    |
| <b>7</b> | Genesee, Monroe, Seneca, Wayne, Yates             |
| <b>8</b> | Chautauqua, Erie                                  |



**Senior Community Service  
Employment Program**  
Regional map

**PART VI  
APPENDIX 2  
AUTHORIZED AND MODIFIED POSITIONS BY REGION**

Region	County	Number of Authorized Positions	Number of Modified Positions
1	Bronx	68	41
	Kings	110	66
	New York	68	41
	Queens	89	55
	Richmond	14	8
	<i>Total:</i>	<b>349</b>	<b>211</b>
2	Rockland	5	4
	Westchester	32	22
	<i>Total:</i>	<b>37</b>	<b>26</b>
3	Albany	8	6
	Fulton	4	3
	Rensselaer	4	3
	Saratoga	4	3
	Schenectady	3	2
	<i>Total:</i>	<b>23</b>	<b>17</b>
4	Clinton	9	6
	Essex	5	4
	Franklin	8	6
	<i>Total:</i>	<b>22</b>	<b>16</b>
5	Jefferson	12	8
	Lewis	4	3
	St. Lawrence	16	11
	<i>Total:</i>	<b>32</b>	<b>22</b>
6	Tioga	5	4
	Tompkins	8	6
	<i>Total:</i>	<b>13</b>	<b>10</b>
7	Genesee	3	2
	Monroe	16	12
	Seneca	5	4
	Wayne	4	3
	Yates	3	2
	<i>Total:</i>	<b>31</b>	<b>23</b>
8	Chautauqua	4	3
	Erie	27	19
	<i>Total:</i>	<b>31</b>	<b>22</b>
<b>State Total:</b>		<b>538</b>	<b>347</b>

**PART VI**  
**APPENDIX 3**  
**REFERENCES**

The following links outline the program requirements and regulations governing Title V of the Older Americans Act, also known as the Senior Community Service Employment Program (SCSEP). Before submitting an application, Applicants should review these documents in order to understand the program requirements and their responsibilities as a sub-recipient.

SCSEP Regulations, e-CFR Title 20, Chapter V, Part 641:

[https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&tpl=/ecfrbrowse/Title20/20cfr641\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&tpl=/ecfrbrowse/Title20/20cfr641_main_02.tpl)

SCSEP Final Rule:

[https://www.doleta.gov/seniors/pdf/FinalRule2010.pdf?\\_sm\\_byp=iVVpLrTRfJ0Pr674](https://www.doleta.gov/seniors/pdf/FinalRule2010.pdf?_sm_byp=iVVpLrTRfJ0Pr674)

Older Americans Act

Reauthorization Act of 2016:

<https://www.congress.gov/114/plaws/publ144/PLAW-114publ144.pdf>

Amendments of 2006:

<https://www.congress.gov/109/plaws/publ365/PLAW-109publ365.pdf>

Title V: [https://www.doleta.gov/seniors/other\\_docs/owp-106-501.pdf](https://www.doleta.gov/seniors/other_docs/owp-106-501.pdf)

**PART VI**  
**APPENDIX 4**  
**GLOSSARY OF TERMS AND ACRONYMS**

<i>At risk for homelessness</i>	An individual is likely to become homeless and the individual lacks the resources and support networks needed to obtain housing.
<i>Authorized position level</i>	The number of SCSEP enrollment opportunities that can be supported for a 12-month period based on the average national unit cost. The authorized position level is derived by dividing the total amount of funds appropriated for a Program Year by the national average unit cost per participant for that Program Year as determined by USDOL. The national average unit cost includes all costs of administration, other participant costs, and participant wage and fringe benefit costs as defined in §506(g) of the OAA.
<i>Community Service Activities</i>	<ul style="list-style-type: none"> <li>• Social, health, welfare, and educational services, legal and other counseling services and assistance, including tax counseling and assistance and financial counseling, and library, recreational, and other similar services;</li> <li>• Conservation, maintenance, or restoration of natural resources;</li> <li>• Community betterment or beautification;</li> <li>• Antipollution and environmental quality efforts;</li> <li>• Weatherization activities;</li> <li>• Economic development; and</li> <li>• Other such services essential and necessary to the community.</li> </ul>
<i>Community Service Assignment</i>	Part-time, temporary employment paid with grant funds in projects at host agencies through which eligible individuals are engaged in community service and receive work experience and job skills that can lead to unsubsidized employment.
<i>Disability</i>	<p>A disability attributable to a mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in one or more of the following areas of major life activity:</p> <ul style="list-style-type: none"> <li>• Self-care;</li> <li>• Receptive and expressive language;</li> <li>• Learning;</li> <li>• Mobility;</li> <li>• Self-direction;</li> <li>• Capacity for independent living;</li> <li>• Economic self-sufficiency;</li> <li>• Cognitive functioning; and</li> <li>• Emotional adjustment.</li> </ul>
<i>Equitable distribution report</i>	A report based on the latest available Census or other reliable data, which lists the optimum number of participant positions in each designated area in the state, and the number of authorized

participant positions each grantee serves in that area. This report provides a basis for improving the distribution of SCSEP positions.

<i>Frail</i>	<p>An individual 55 years of age or older who is determined to be functionally impaired because the individual:</p> <ol style="list-style-type: none"><li>1. Is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or</li><li>2. Due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.</li></ol>
<i>Greatest economic need</i>	<p>The need resulting from an income level at or below the poverty guidelines established by the Department of Health and Human Services and approved by the Office of Management and Budget.</p>
<i>Greatest social need</i>	<p>The need caused by non-economic factors, which include: physical and mental disabilities; language barriers; and cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, which restricts the ability of an individual to perform normal daily tasks or threatens the capacity of the individual to live independently.</p>
<i>Homeless</i>	<ul style="list-style-type: none"><li>• An individual who lacks a fixed, regular, and adequate nighttime residence; and</li><li>• An individual who has a primary nighttime residence that is:<ul style="list-style-type: none"><li>○ A supervised publicly or privately operated shelter designated to provide temporary living accommodations;</li><li>○ An institution that provides a temporary residence for individuals intended to be institutionalized; or</li><li>○ A public or private place not designed for, or ordinarily used as, regular sleeping accommodations for human beings.</li></ul></li></ul>
<i>Host Agency</i>	<p>A public agency or a private nonprofit organization exempt from taxation under §501(c)(3) of the Internal Revenue Code of 1986 which provides a training work site and supervision for one or more participants. Political parties cannot be host agencies. A host agency may be a religious organization as long as the projects in which participants are being trained do not involve the construction, operation, or maintenance of any facility used or to be used as a place for sectarian religious instruction or worship.</p>
<i>Individualized Employment Plan (IEP)</i>	<p>A plan for a participant that is based on an assessment of that participant conducted by SCSEP staff, or a recent assessment or plan developed by another employment and training program, and a related service strategy. The IEP must include an appropriate employment goal, objectives that lead to the goal, a timeline for the achievement of the objectives; and be jointly agreed upon with the</p>

participant.

<i>Job ready</i>	Refers to individuals who do not require further education or training to perform work that is available in their labor market.
<i>Limited English proficiency</i>	Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.
<i>Low employment prospects</i>	<p>It is likely that an individual would not obtain employment without the assistance of SCSEP or another workforce development program. Persons with low employment prospects have a significant barrier to employment, including but not limited to:</p> <ul style="list-style-type: none"><li>• Lacking a substantial employment history, basic skills, and/or English-language proficiency;</li><li>• Lacking a high school diploma or the equivalent;</li><li>• Having a disability;</li><li>• Being homeless; or</li><li>• Residing in socially and economically isolated rural or urban areas where employment opportunities are limited.</li></ul>
<i>Low literacy skills</i>	The individual computes or solves problems, reads, writes, or speaks at or below the 8th grade level or is unable to compute or solve problems, read, write, or speak at a level necessary to function on the job, in the individual's family, or in society.
<i>Modified position</i>	The number of authorized positions state in the Equitable Distribution report is based on the Federal minimum wage. The modified position number represents the actual number of positions available on the local minimum wage.
<i>Most-in-need</i>	<p>Participants with one or more of the following characteristics:</p> <ul style="list-style-type: none"><li>• Have a severe disability;</li><li>• Are frail;</li><li>• Are age 75 or older;</li><li>• Are age-eligible but not receiving benefits under title II of the Social Security Act;</li><li>• Reside in an area with persistent unemployment and have severely limited employment prospects;</li><li>• Have limited English proficiency;</li><li>• Have low literacy skills;</li><li>• Have a disability;</li><li>• Reside in a rural area;</li><li>• Are veterans;</li><li>• Have low employment prospects;</li><li>• Have failed to find employment after using services provided under title I of WIOA;</li><li>• Or are homeless or at risk for homelessness.</li></ul>



<i>NYSOFA</i>	New York State Office for the Aging
<i>OAA</i>	Older Americans Act
<i>One-Stop Center</i>	The One-Stop Center system in a WIOA local area which must include a comprehensive One-Stop Center through which One-Stop partners provide applicable core services and which provides access to other programs and services carried out by the One-Stop partners.
<i>One-Stop Delivery System</i>	A system under which employment and training programs, services, and activities are available through a network of eligible One-Stop partners, which assures that information about and access to core services is available regardless of where the individuals initially enter the workforce investment system.
<i>Participant</i>	An individual who is determined to be eligible for SCSEP, is given a community service assignment, and is receiving any allowable service funded by the program.
<i>Persistent unemployment</i>	The annual average unemployment rate for a county or city is more than 20 percent higher than the national average for two out of the last three years.
<i>Poor employment prospects</i>	<p>The significant likelihood that an individual will not obtain employment without the assistance of SCSEP or another workforce development program. Persons with poor employment prospects have a significant barrier to employment including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Lacking a substantial employment history, basic skills, and/or English-language proficiency;</li> <li>• Lacking a high school diploma or the equivalent;</li> <li>• Having a disability;</li> <li>• Being homeless; or</li> <li>• Residing in socially and economically isolated rural or urban areas where employment opportunities are limited.</li> </ul>
<i>SCSEP</i>	Senior Community Service Employment Program
<i>Severe disability</i>	<p>A severe, chronic disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that:</p> <ul style="list-style-type: none"> <li>• Is likely to continue indefinitely; and</li> <li>• Results in substantial functional limitation in 3 or more of the following areas of major life activity: <ul style="list-style-type: none"> <li>○ Self-care;</li> <li>○ Receptive and expressive language;</li> <li>○ Learning;</li> <li>○ Mobility;</li> </ul> </li> </ul>

- Self-direction;
- Capacity for independent living;
- Economic self-sufficiency.

<i>Severely limited employment prospects</i>	<p>The substantial likelihood that an individual will not obtain employment without the assistance of SCSEP or another workforce development program. Persons with severely limited employment prospects have more than one significant barrier to employment including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Lacking a substantial employment history, basic skills, and/or English-language proficiency;</li> <li>• Lacking a high school diploma or the equivalent;</li> <li>• Having a disability;</li> <li>• Being homeless; or</li> <li>• Residing in socially and economically isolated rural or urban areas where employment opportunities are limited.</li> </ul>
<i>Supportive services</i>	<p>Services, such as transportation, health and medical services, special job-related or personal counseling, incidentals (such as work shoes, badges, uniforms, eye-glasses, and tools), child and adult care, housing, including temporary shelter, follow up services, and needs-related payments, which are necessary to enable an individual to participate in activities authorized under SCSEP.</p>
<i>Title V</i>	<p>The Title of the Older Americans Act that establishes the Senior Community Service Employment Program.</p>
<i>Unemployed</i>	<p>An individual who is without a job and who wants and is available for work, including an individual who may have occasional employment that does not result in a constant source of income.</p>
<i>USDOL</i>	<p>United States Department of Labor, the federal oversight agency for SCSEP.</p>
<i>WIOA</i>	<p>The Workforce Innovation and Opportunity Act, which is designed to help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with the skilled workers they need to complete in the global economy.</p>

