Invitation For Bid For Mental Health Services

**Economic Security Corporation of Southwest Area**

**302 S. Joplin Street**

**417-627-2069**

**417-781-1234**

**6/23/2021**

Leisa Harnar, Operations & Development Director

Head Start is a premier child development and school readiness program designed to give children from low socioeconomic backgrounds an opportunity to be on equal footing with their peers.

PART I: INSTRUCTIONS TO BIDDER

1. This bid is for mental health services delivered to the Head Start Program (HS/EHS) sponsored by Economic Security Corporation of Southwest Area (ESC) and operating in the four-county area of Barton, Jasper, Newton and McDonald Counties in Missouri. The contract shall be in effect for a period of (2) two years.
2. Bidders must direct all questions to Leisa Harnar, Operations & Development Director at (417) 627-2069, lharnar@escswa.org and must not lobby other agency employees. If needed, Ms. Harnar will provide technical help in filling out bid forms. Should you spoil your bid forms, new ones will be provided upon request.
3. You must answer all questions and complete all bid forms. ESC may reject incomplete bids.
4. Each page numbered with an Arabic number (1,2,3,etc.) must be returned with your bid. It is **not** necessary to return Roman numbered (i,ii,iii,etc.) pages.
5. All pages of the Invitation For Bid that contain a signature line **must** be signed with an original hand written signature by an authorized agent of the bidder for the bid to be considered for funding. If the signer is someone other than the owner, president, or chairperson of the board, you should include an exhibit specifically authorizing the signer to contract for the bidding organization.
6. All minimum specifications **must** be met for the bid to be considered. Failure to do so will be grounds for disqualifying the bid.
7. **Return bids to**:

Economic Security Corporation of Southwest Area

Attention: Leisa Harnar, Operations & Development Director

302 Joplin Street

P.O. Box 207

Joplin, Missouri 64802-0207

Sealed bids may be mailed or hand delivered, but **must** **be received** in the offices of Economic Security Corporation before the bid closing and submission deadline.

1. All bids must be submitted in a sealed package with the words:

**“DO NOT OPEN, Sealed Bid for HS Therapeutic Counselor enclosed”**

clearly marked on the outside. It is the bidder’s responsibility to ensure that this information is legible and stands out. A bid opened before the submission deadline will be disqualified if the opening results in disclosure of the bid.

1. **Bid closing and submission deadline is Friday, July 9, 2021 at 5:00 p.m.** **Bids received after the deadline will not be considered**. Economic Security Corporation of Southwest Area will not be responsible for misdirected mail or delivery. It is the bidder’s responsibility to ensure that the bid is properly received.
2. **Bid opening will be Monday, July 12, 2021 at 11:00 a.m. in the offices of:**

### **Economic Security Corporation of Southwest Area**

**302 S. Joplin St.**

**Suite 311**

**Joplin, Missouri 64801**

1. Bidders are not required to attend the bid opening.Prices of bids will not be supplied on the telephone or in person to bidders not attending the bid opening. Because selection process involves an interview, only the top 2 bids will be asked to schedule an interview.
2. Bidders may submit one or more bids. Forms may be reproduced in full for submission of multiple bids. Bid format cannot be altered.
3. We will award the contract to the bid submitted by a responsive and responsible bidder scoring the highest based on 2 scores. The initial score will include cost, method of performance, and experience & reliability. The top 2 bidders with the highest initial scores will then be asked to participate in an interview. The second score will be added in after the interview:

|  |  |
| --- | --- |
| Cost | 25% |
| Method of Performance | 25% |
| Experience and Reliability | 25% |
| Interview | 25% |
|  Total Possible Score | 100% |

1. Once interviews are completed and the ESC Governing Board has provided approval, the winning bidder will be notified.
2. The agency reserves the right to reject any or all bids.
3. The agency reserves the right to negotiate the terms and conditions, including the price of an award.
4. The performance of the winning bidder must conform to acceptable business standards. Poor service, pricing problems, delays, etc., may result in cancellation of the bid award. In such cases the Board of Directors may review the bids and select another bidder, may re-bid the item (s), or may cancel the bid process with no purchase.
5. Economic Security Corporation reserves the right to consider historic information and fact, whether gained from the bidder’s proposal, question and answer conferences, references, or any other source, in the evaluation process.
6. The winning bidder shall not assign any interest in the contract and shall not transfer any interest, whatsoever, in the same (whether by assignment or novation), without the express written consent of the agency.
7. The bidder must comply with the following laws, regulations, and executive orders:

Clean Air Act

Health Insurance Portability and Accountability Act (HIPAA)

Public law 88-132, Civil Rights Act of 1964 and all amendments.

 Public law 90-222, Age Discrimination Act of 1967.

Public law 90-480, Agricultural Barriers Act of 1972.

Public law 92-261, Equal Opportunity Act of 1972.

Public law 93-112, Rehabilitation Act of 1973

Executive Order 11764

Public Law 94-135, Age Discrimination Act of 1978.

Public Law 95-555, Pregnancy Discrimination Act of 1978.

Public Law 88-452, As amended by Public Law 92-424 Equal Opportunity Act.

Executive Order 11246,Equal Employment Opportunity Act as amended by Executive Order 11375 and supplemented by Department of Labor Regulation 41-CFR Part 60.

18-USC-87 and 29 CFR, Part 3, Copeland Anti-Kickback Act.

Public Law 101-336, Americans with Disabilities Act of 1990.

1. The agency may terminate the awarded contract at any time for substantial non-performance by providing the contractor written notice of said termination. If the agency exercises its right to terminate for cause; termination shall be effective on the date specified in the notice of termination sent to the contractor. The agency may further terminate the contract solely upon its discretion with 30 days written notice to the contractor. The terms and conditions of the contractual requirements have been read and will be observed upon award of the contract.

# PART II: MINIMUM SERVICE REQUIREMENTS

BID MUST BE FOR SERVICES THAT MEET ALL REQUIREMENTS OF THIS SPECIFICATION FORM.

1. Therapeutic Counselor **must** be a State of Missouri Licensed Psychologist, a Licensed Clinical Social Worker, and/or a Licensed Professional Counselor.
2. Therapeutic Counselor **must** establish and maintain his/her own billing system and be able and willing to bill Medicaid and/or private insurance for additional services beyond the attached Scope of Work.
3. Therapeutic Counselor **must** have experience working with children ages three to five years and their families.
4. Therapeutic Counselor **must** be knowledgeable about working with low-income families.
5. Therapeutic Counselor **must** be available to provide services to all HS centers in the four-county area served by ESC. Head Start is only open August to May. See attached list of centers.

**Therapeutic Counselor requirements:**

1. **Head Start**: **Must** provide individual and family counseling to enrolled participants and their guardians. Make referrals for participants to other counseling services, as needed. Services may be provided in the home, center, or consultant’s office. APPROXIMATELY 20 PARTICIPANTS OVER COURSE OF PROGRAM YEAR x 1 HOUR x 6 SESSIONS = 120 HOURS
2. **Head Start**: **Must** make 1 hour visits to each center with “identified” children once a week to observe, provide behavioral/developmental screening information, and provide staff with guidance. 1 HOUR x 13 CHILDREN/CASELOAD x 21 VISITS = 273 HOURS
3. **Early HS/HS**: **Must** meet with the HS Mental Health and Wellness Coordinator on a monthly basis to review program plans, needs and collaborate on a schedule for services for the program year. 8 MONTHS x 2 HOURS = 32 HOURS

**TOTAL HOURS FOR PROJECT = APPROXIMATELY 50 HOURS PER MONTH x 8.5 MONTHS = 425 HOURS**

ADDITIONAL INFORMATION/REQUESTS:

In addition to the above requirements, the following is required and/or expected of the Mental Health and Wellness Consultant:

a) Consultants will be required to participate in the EHS/HS Orientation Training and sign the Standards of Conduct form (see attached).

b) Complete the ESC background check process which includes Missouri CaseNet, Missouri Family Childcare and Safety Registry, and Missouri Highway Patrol fingerprint process.

c) Enter classroom observations into the program’s child tracking database.

d) Ensure timely responses to staff and parent requests for counseling.

e) Ensure prompt notification of staff if consultant becomes aware of any immediate threat to employees and/or children discovered through the provision of mental health services with a specific parent/employee.

**PART III: PAPERWORK/REPORTING REQUIREMENTS**

1. Read the complete Invitation for Bid first before filling out any forms. **DO NOT ENTER A PRICE FOR ANY ITEM UNTIL ALL SPECIFICATIONS AND REQUIREMENTS ARE UNDERSTOOD.** All bid requirements specified as **"must"** have to be met for the bid to be considered. Technical help in filling out forms is available by contacting the person listed in the section on "Questions About Bid." If you spoil your bid forms, new ones will be furnished upon request. Incorrectly completed bid forms could result in the rejection of your bid.
2. Failure of the bidder to comply with any bid requirement is grounds for bid disqualification. Each item must meet all minimum requirements of the specifications form, the general specifications section, and all other requirements of this invitation to bid. To comply with this requirement, all instructions or specifications prefaced with the word **"must"** have to be met.
3. All items in a multiple item bid package must be bid. If any item consists of more than one component, all components of that item must be included in the offeror's bid. If service is required at more than one location, all locations must be included in the bid price.
4. After the selection of the winning bid(s), letters will be mailed to all responding bidders at the last known address notifying them of the award(s) made by the Economic Security Corporation’s Board of Directors.
5. In the event that Economic Security Corporation’s Board of Directors determines that an insufficient number of vendors have submitted bids or that such bids received exceed the expected current market prices, all bids may be rejected and in such case the item(s) may be re-bid. If only one bid is received in response to the Invitation to Bid, Economic Security Corporation reserves the right to negotiate the terms and conditions, including the price, as proposed in the sole bidder’s proposal. In the process of such negotiation, supporting cost, pricing, and other documentation may be required from the sole bidder so the agency may determine the reasonableness and acceptability of the proposal.

**PART IV: PRICING**

Economic Security Corporation of the Southwest Area (referred to as ESC) wishes to contract for services as contained in this Invitation for Bid

**THE THERAPEUTIC COUNSELOR BIDDER, SHALL SUBMIT BID PRICES FOR HOURLY FEES** **(a unit of service) AND COST PER MILE TRAVEL REIMBURSEMENT.** Hourly fees will be paid for commuting to and from HEAD START facilities or to a participant’s home as well as a Mileage Reimbursement. The amount of this reimbursement is to be identified in the Pricing Page. Further, mileage reimbursement will not be paid for commuting distance from home to the provider’s office, to meals, or for other personal travel, or for any distance not traveled in response to a service to this agency. Bidder must specify the **primary office location** from which mileage will be calculated. If any trip involves more than one person traveling to and from the same place at the same time, only one mileage reimbursement will be paid. Mileage reimbursement will not be paid unless mileage is properly documented and invoiced.

**THE MENTAL HEALTH CONSULTANT BIDDER, SHALL SUBMIT BID PRICES FOR HOURLY FEES**. If a bidder chooses to donate a portion of their fee as an in-kind donation, this should be clearly indicated on the bid-pricing page. For example: if you normally charge $100 per hour, you would charge Head Start $70.00 per hour and donate the remaining $30.00 to our program as an in-kind donation.

No quantities are guaranteed. We reserve the right to adjust the schedule to meet our budgetary limits.

**QUANTITY ESTIMATE:** Any quantities indicated in the Invitation For Bid are estimates only. This agency does not guarantee specific quantities of any item or supply will be purchased. NO QUANTITIES ARE GUARANTEED. Economic Security Corporation may, at its sole option, wish to change quantities of any item(s), make multiple orders from this same bid form, or negotiate with the winning bidder for different items, specifications, or quantities within one year of the Guarantee Period specified herein. If multiple purchases are not available at the price(s) quoted, or if prices will be different for smaller quantities, that fact must be stated and quantified. Bidders should describe any quantity discounts available for purchase amounts above this amount.

**Head Start Therapeutic Counselor**

1. Enter total bid price per unit of service (gross hourly fee) $\_\_\_\_\_\_\_\_\_
2. Minus that portion of bid price per unit of service (gross hourly fee)

to be considered a donation to ESC’s Early Head Start Program $(\_\_\_\_\_\_\_\_)

1. Enter total net bid price per unit of service (net hourly fee) $\_\_\_\_\_\_\_\_\_
2. Enter mileage rate (cents per mile) $\_\_\_\_\_\_\_\_\_

#### BID MUST BE SIGNED TO BE VALID

The bidder hereby agrees to furnish items and/or services, at the price(s) quoted, pursuant to all requirements and specifications contained in this Invitation for Bid, upon receipt of an authorized Purchase Order. The bidder agrees that the language in the Invitation for Bid (IFB) shall govern in the event of a conflict with the language in the bid.

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company’s Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Location (for mileage calculation): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Printed Name of Signer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer's Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer’s email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART V: NARRATIVE SECTION**

**INCLUDE A BRIEF NARRATIVE ON THIS PAGE.** Narrative should be typewritten or printed for legibility.

1. Include information such as how the bidder will meet or exceed the specifications in Part II, method of work, screenings/assessments used, methods of service delivery, areas of expertise, experience working with preschoolers and their families, and any other information you want to include. You should include any additional narrative or material last, as an exhibit.
2. What is the maximum length of time for your response following a request for a telephone consultation? For an in-person counseling session?

**PART VI: EXPERIENCE AND RELIABILITY**

**INCLUDE A BRIEF NARRATIVE ON THIS PAGE.** Narrative should be typewritten or printed for legibility. Use only the space provided.

1. Describe insurance and bonding coverage and limits carried by yourself or your firm. You may include declarations page as an attachment to help describe coverage.

2. Name the personnel who will perform the services, provide their credentials and licensure information and discuss their expertise in the field. Describe their experience with similar client types.

The agency may terminate the contract at any time for substantial non-performance by providing this contractor written notice of said termination. If the agency exercises its right to terminate for cause, termination shall be effective on the date specified in the notice of termination sent to the contractor. The terms and conditions of the contractual requirements have been read and will be observed upon award of contract.

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

**PART VII: APPENDICES**

All appendices must be filled out and returned as part of the bid.

APPENDIX A: Bidder's References must be filled out and returned.

APPENDIX B: Equal Opportunity Program and Affirmative Action Plan Compliance must be filled out, signed by an authorized agent of the bidder, and returned.

**APPENDIX A**

Provide References for similar work your company has done in the past. References should be, as nearly as possible, for work that meets the same specifications as listed in this Invitation for Bid.

**REFERENCE #1**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Description of materials or services supplied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFERENCE #2**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Description of materials or services supplied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFERENCE #3**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Description of materials or services supplied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# APPENDIX B

**EQUAL EMPLOYMENT OPPORTUNITY PROGRAM**

**AND AFFIRMATIVE ACTION PLAN COMPLIANCE**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

I certify that this firm is in compliance with Executive Order Number 11246, Title VI and VII of the Civil Rights Act of 1964, and that a non-discriminating policy in employment is observed.

The following is information on our employees:

Total number of employees: \_\_\_\_\_

Total number of non-white employees:

 Black: \_\_\_\_\_

 Indian: \_\_\_\_\_

 Hispanic: \_\_\_\_\_

 Asian: \_\_\_\_\_

 Other non-white: \_\_\_\_\_

Total number of non-white professional employees:

 Black: \_\_\_\_\_

 Indian: \_\_\_\_\_

 Hispanic: \_\_\_\_\_

 Asian: \_\_\_\_\_

 Other non-white: \_\_\_\_\_

Please attach a copy of Affirmative Action or Equal Opportunity policies, if available.

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Signer's Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_