REQUEST FOR QUALIFICATIONS
RFQu #21-DS-018

INSTITUTE OF HIGHER EDUCATION PARTNERSHIPS FOR
CONDITIONALLY CERTIFIED INSTRUCTIONAL STAFF

Issue Date: 5/18/2021
Open Solicitation
No Due Date and Time

Submit Proposals to:
Denise.Semenkow@hcps.org
TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Technical Specifications</td>
<td>3</td>
</tr>
<tr>
<td>Purpose</td>
<td>3</td>
</tr>
<tr>
<td>Contract Period</td>
<td>3</td>
</tr>
<tr>
<td>Contract Documents</td>
<td>3</td>
</tr>
<tr>
<td>Scope of Work</td>
<td>3</td>
</tr>
<tr>
<td>Offerors Requirements</td>
<td>4</td>
</tr>
<tr>
<td>Proposal Evaluations</td>
<td>4</td>
</tr>
<tr>
<td>Termination of Contract</td>
<td>5</td>
</tr>
<tr>
<td>RFQu Coordinator</td>
<td>6</td>
</tr>
<tr>
<td>Submittal Response</td>
<td>6</td>
</tr>
<tr>
<td>Response Format</td>
<td>6</td>
</tr>
<tr>
<td>Offerors Cost to Develop RFQu</td>
<td>6</td>
</tr>
<tr>
<td>Additional Information</td>
<td>6</td>
</tr>
<tr>
<td>Submittal Requirements</td>
<td>7</td>
</tr>
<tr>
<td>Background</td>
<td>7</td>
</tr>
<tr>
<td>Tuition</td>
<td>7</td>
</tr>
<tr>
<td>Application Process</td>
<td>7</td>
</tr>
<tr>
<td>Coursework and Additional Services</td>
<td>7</td>
</tr>
<tr>
<td>Praxis Core Assessments</td>
<td>7</td>
</tr>
<tr>
<td>edTPA</td>
<td>7</td>
</tr>
<tr>
<td>Cohort</td>
<td>7</td>
</tr>
<tr>
<td>Requirements of HCPS</td>
<td>8</td>
</tr>
<tr>
<td>References</td>
<td>8</td>
</tr>
<tr>
<td>Required Documents</td>
<td>8</td>
</tr>
<tr>
<td>Signature Sheet</td>
<td>10</td>
</tr>
<tr>
<td>Required Documentation</td>
<td>11</td>
</tr>
<tr>
<td>Conflict of Interest Form</td>
<td>12</td>
</tr>
<tr>
<td>Employment of Sex Offenders and Other Criminal Offenders Affidavit</td>
<td>13</td>
</tr>
<tr>
<td>Anti-Bribery Affidavit</td>
<td>14</td>
</tr>
<tr>
<td>Debarment Certification</td>
<td>15</td>
</tr>
</tbody>
</table>
Technical Specifications
Institute of Higher Education Partnerships for Conditionally Certified Instructional Staff
RFQu #21-DS-018

1. PURPOSE

1.1 The Board of Education of Harford County Public Schools (HCPS) is issuing this Request for Qualifications (RFQu) for the purpose of soliciting proposals from Institutes of Higher Education (IHE) to create partnerships to provide support to our conditionally certified instructors within areas of critical need. It is HCPS’ intent to pre-qualify IHE’s as a result of this RFQu. The number of partnerships created will be dependent on the number of qualified proposals received.

1.2 HCPS has approximately 2,885 instructors, of which 74 are conditionally certified. All conditionally certified instructional staff must complete the requirements for certification within four (4) years. Twelve (12) credits must be completed within the first two (2) years. The remaining credits must be completed within the next two (2) year period in order to gain professional certification as a teacher from the Maryland State Department of Education (MSDE).

1.3 It is the intent of this specification to provide the prospective offeror(s) with complete information relative to the total performance of any resultant contract. Offerors are obligated to read and understand all parts of this request for qualifications and to obtain clarification of any part not thoroughly understood.

2. CONTRACT PERIOD

The contract term shall be agreed upon by both parties, included in the Memorandum of Understanding and fully executed.

3. CONTRACT DOCUMENT

This RFQu and the agreed upon Memorandum of Understanding (MOU) shall serve as the contract. Offerors will be expected to sign the MOU within fifteen (15) business days of receipt. If any offeror wishes to take exception to any provision of the agreement or the RFQu, all such exceptions shall be stated specifically and in writing. Offerors are further advised that under certain circumstances the provisions of a proposal can be subject to negotiation.

4. SCOPE OF SERVICES

4.1 COURSEWORK

<table>
<thead>
<tr>
<th>4.1.1</th>
<th>Secondary Professional Coursework</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>o</td>
<td>Adolescent Development</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Human Learning</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Teaching Methodology</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Assessment of Students</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Inclusion of Special Needs Students</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Teaching Reading/Literacy in Content Area I</td>
<td>3</td>
</tr>
<tr>
<td>o</td>
<td>Teaching Reading/Literacy in Content Area II</td>
<td>3</td>
</tr>
</tbody>
</table>
4.1.2 **Generic Special Education Grades 6 – Adult**

- **Foundations of Special Education** 3 Credits
- **Human Growth and Development** 6 Credits
- **Assessment, Diagnosis, and Prescriptive Techniques (3 semester hours at the Secondary Level)** 9 Credits
- **Teaching Reading/Literacy in Content Area I** 3 Credits
- **Teaching Reading/Literacy in Content Area II** 3 Credits
- **Special Education (3 semester hours specific to vocational or prevocational methods)** 6 Credits
- **Communication Skills emphasizing human relations, Parent Counseling, parent conferencing and communication** 3 Credits
- or in lieu of individual courses, an approved post-bachelor’s or masters degree program in secondary education or special addition

4.2 **PRAXIS CORE ASSESSMENTS**

All state certified instructional staff, who received below a 3.0 G.P.A. in their most recently earned degree must successful complete the Praxis Core Assessments as well as relevant content-specific components to qualify for state certification.

4.3 **EDUCATIVE TEACHER PERFORMANCE ASSESSMENT (edTPA)**

Beginning in the 2022-2023 school year, Maryland teachers will be required to complete the edTPA assessment.

4.4 Offerors are permitted to submit a response that addresses some, but not all of the elements within the Scope of Services.

4.5 Currently HCPS has 74 Conditionally certified teachers on staff.

4.6 Conditionally certified instructional staff are expected to complete the outlined Secondary Professional Coursework, however they can also complete an approved program to meet the requirements.

4.7 Conditionally certified instructional staff are able to complete course work on their own timeline.

5. **OFFERORS REQUIREMENTS / QUALIFICATIONS**

The Institution of Higher (IHE) must meet at least one the following accreditation standards (evidence must be provided with submittal):

5.1 Accredited by an accrediting commission in one of the regional associations of colleges and schools or

5.2 Participates in the ICC or the NCATE programs or

5.3 Coursework is accepted by the state in which the institution is located for teacher certification purposes.

6. **PROPOSAL EVALUATION**

6.1 Along with the fulfillment of the RFQu, any legal requirements and Offeror’s proposal submissions, the
following criteria will be utilized to evaluate those proposals:

6.1.1 Recognition & suitability of offeror, offeror’s name, appropriateness of proposed program(s) and content.

6.1.2 Overall ability of offeror’s proposal to meet the scope of services and requirements of HCPS.

6.1.3 Overall financial value to HCPS and staff.

6.1.4 Offeror’s satisfy the accreditation standards. (Accreditation will be verified through Database of Accredited Postsecondary Institutions and Programs [https://ope.ed.gov/dapip/#/home]).

6.2 HCPS reserves the right to request clarification of and/or additional proposal information that may be required for evaluation of proposals. As noted above, however, this does not include the negotiation of the terms of any proposal.

6.3 The contract, if awarded, will be awarded to the offerors whose proposals are deemed to be the most advantageous to HCPS based on the factors stated above.

6.4 Offerors are advised that in the event of receipt of an adequate number of proposals, which require no clarification or supplementary information, such proposals may be evaluated without further discussions. Therefore, initial proposals should be submitted on the most complete and favorable terms and conditions. Should proposals submitted require additional clarification or supplementary information, such information shall be submitted in a timely manner.

6.5 In determining the qualifications of an Offeror, HCPS will consider the Offeror’s record and performance of any prior contracts with HCPS or other public bodies, including but not limited to the Offeror’s providing similar programs/services to HCPS, other schools, or school districts. HCPS reserves the right to reject the proposal of any Offeror if the investigation discloses that the Offeror, in HCPS’ opinion, has not properly performed such prior contracts or has habitually and without just cause neglected the payment of bills or has otherwise disregarded its obligations to subcontractors or employees.

6.6 After review of proposals, HCPS, at its sole discretion, may ask individual offerors to make oral presentations, informal telephone interviews or demonstrations without charge to HCPS.

6.7 HCPS reserves the right to negotiate or modify any element of the proposal to ensure that the best possible arrangements for achieving the stated purpose is obtained.

6.8 Proposals shall be evaluated, and the offeror notified of the results.

7. **TERMINATION OF CONTRACT**

7.1 Termination for Default

7.1.1 If the Provider fails to fulfill its obligations under this contract properly and on time, otherwise violates any provision of the Contract, HCPS may terminate the Contract by written notice to the Provider. The notice shall specify the acts of omissions relied on as cause for termination.

7.1.2 All finished or unfinished supplies and services provided by the Provider, shall at HCPS’ option, become HCPS property. HCPS shall pay the Provider fair and equitable compensation for satisfactory performance prior to receipt of Notice of Termination, less the amount of damages caused by Provider’s breach.

7.1.3 If the damages are more than the compensation payable to the Provider, the Provider will remain liable after termination and HCPS can affirmatively collect damages.
7.2 Termination for Convenience

HCPS may terminate all or part of the work required under this contract for the convenience of HCPS with a ninety (90) day notification. In the event of such termination, the Contract Administrator shall determine the costs the Provider has incurred to the date of termination and such reasonable costs associated with the termination. HCPS shall pay such costs as determined by the Contract Administrator to the Provider together with reasonable profit reasonably earned by the Provider to the time of termination but not to include any profit not earned as of the date of termination.

8. RFQu COORDINATOR

Upon release of this RFQu, all communications should be directed in email to the RFQu Coordinator listed below. Unauthorized contact regarding this RFQu with other HCPS employees may result in disqualification. Any oral communications will be considered unofficial and non-binding on the School District. Any questions regarding this RFQu must be submitted via email to the RFQu Coordinator.

RFQu Coordinator will be:
Name: Denise Semenkow
Email: denise.semenkow@hcps.org

9. SUBMITTAL RESPONSE

All proposals shall be emailed to Denise.Semenkow@hcps.org. Mark subject line - RFQu #21-DS-018 IHE Partnerships for Conditionally Certified Instructional Staff. Only electronical submittals will be accepted. It is the Offeror(s) responsibility to verify that the Proposal has been received, prior to the due date. ‘Read Receipts’ are not sufficient. Offeror(s) may contact the Buyer listed within the solicitation, by email or phone, to confirm receipt of bids.

10. RESPONSE FORMAT

Request for Qualifications should be prepared simply and provide the information requested.

10.1 Offerors shall submit the following:
10.1.1 Proposal
10.1.2 Required Documentation (Electronic Signatures are acceptable)

10.2 If confidential materials are submitted, offerors are requested to submit one (1) additional electronic copy of their submittal for the purposes of Freedom of Information Requests. The redacted electronic copy shall be marked “Redacted Copy”. It is understood that this copy may be made available to any requesting party without prior consent or approval from the originator. Blanket requests for the entire proposal to be held confidential will not be considered.

11. OFFERORS COST TO DEVELOP REQUEST FOR QUALIFICATIONS

Costs for developing responses to this RFQu are the obligation of the offeror and shall not be chargeable in any manner to HCPS.

12. ADDITIONAL INFORMATION

12.1 This RFQu imposes no contractual obligation whatsoever on the part of the HCPS or Offeror.

12.2 Offeror is to submit electronically a complete “Proposal” that contains signatures (no signature photocopies or signature stamps permitted) for HCPS analyzation purposes.

12.3 HCPS reserves the right to reject any or all proposals or not award a contract.
12.4 If an offeror discovers any ambiguity, conflict, omission or other error in the specifications, offeror shall immediately notify the Purchasing Department of such error and request clarification of the document. Offeror understands that the only official answer or position of HCPS will be the one stated in writing by the RFQu Coordinator, or in their absence an authorized representative.

13. **SUBMITTAL REQUIREMENTS**

Proposals for this Request for Qualifications should include the following:

13.1 **Background**

Provide general background information regarding your institution, including a summary of previous experiences with the implementation of similar solutions of the same scope and size.

13.2 **Tuition**

13.2.1 Describe your current tuition rate (total tuition rate, cost per credit hour and any applicable discounts).

13.2.2 Describe the direct billing options that are offered. Also describe direct billing parameters (i.e., HCPS currently has a partnership that allows staff members to pay a nominal fee of $75.00 out of pocket and the remaining fees are billed directly to HCPS).

13.2.3 Provide any additional costs associated with these services.

13.3 **Application Process**

13.3.1 Explain your institution’s application requirements and timeline. Include dates for any applicable special programs.

13.3.2 Are potential students able to complete coursework toward certification without being enrolled in a degree program?

13.3.3 Are students able to apply completed coursework toward graduate course requirements?

13.4 **Coursework and Additional Services**

13.4.1 **Coursework**

13.4.1.1 Of the services listed in Item #4 Scope of Services, which do you currently offer and how frequently?

13.4.1.2 What additional services and/or coursework do you currently offer?

13.4.1.3 Which delivery formats are they presented?

13.4.1.4 Provide details of when courses are available. (i.e., Fall, Winter, Spring, Summer Semesters)

13.4.2 **Praxis Core Assessments**

13.4.2.1 What resources outside of the coursework do you offer to assist students in preparing for the Praxis Assessment?

13.4.2.2 How frequently are the resources offered?

13.4.2.3 Which delivery formats are they provided?
13.4.2.4 Are there additional costs to utilize the available resources?

13.4.3 edTPA

Describe what coursework and/or resources you have in place or are developing to prepare teachers for the new assessment requirement.

13.4.4 Cohort (An open pathway with more flexibility is preferred)

13.4.4.1 Describe your institution’s cohorts. Provide what guidelines must be met to establish a new cohort.

13.4.4.2 Are university personnel available to conduct classes in a designated Harford County Public Schools facility? If so, what specific requirements must be met to establish this arrangement?

13.4.4.3 Which instructional delivery models will be offered to established cohorts? (i.e., virtual or in-person)

13.4.4.4 Are cohorts closed or are students allowed to enter the program to take the needed coursework?

13.4.4.5 Additional Services

Describe what additional resources, programs or support do you currently offer students working towards state certification.

13.5 Requirements expected of HCPS

Please provide any requirements/responsibilities of HCPS staff and facilities.

13.6 References

13.6.1 Provide a minimum of three (3) reference letters from clients that your institution has provided or is providing services similar in scope to the RFQu. HCPS reserves the right to ask for additional references.

13.6.2 Reference letters shall be current, dated within one (1) year of this request.

13.6.3 The reference from the client must be provided on their letterhead, and include details regarding your institution’s role, level of service provided, etc.

13.6.4 One (1) reference from Harford County Public Schools may be considered.

13.6.5 Please include current contact information for all references, including name, phone number, and e-mail address.

13.7 Required Documents

13.7.1 Conflict of Interest Disclosure Form

13.7.2 Employment of Sex Offenders and Other Criminal Offenders Affidavit

13.7.3 State of Maryland Anti Bribery Affidavit

13.7.4 Certification Regarding U.S. Government Debarment, Suspension, Ineligibility, and Voluntary
Exclusion

13.7.5 Evidence of accreditation standards
**SIGNATURE SHEET**
*(To be submitted with Proposal)*

I/We agree to provide the services in accordance with the accompanying requirements and all conditions, provisions, attachments, and any addenda to this RFQu.

<table>
<thead>
<tr>
<th>Company</th>
<th>Authorized Representative (print)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Signature</td>
</tr>
<tr>
<td>Address (continued)</td>
<td>Title (print)</td>
</tr>
<tr>
<td>Name of Firm’s Contract Administrator</td>
<td>Phone Number of Authorized Representative</td>
</tr>
<tr>
<td>Phone Number of Firm’s Contract Administrator</td>
<td>E-mail Address of Authorized Representative</td>
</tr>
<tr>
<td>E-mail Address of Firm’s Contract Administrator</td>
<td>Federal I.D. Number</td>
</tr>
</tbody>
</table>

**Acknowledgement of Addenda (if issued)**

I/We acknowledge receipt of the following Addenda:

No. __________, Dated __________

No. __________, Dated __________

No. __________, Dated __________

No. __________, Dated __________
Request for Qualifications
RFQu #21-DS-018

PROPOSAL DOCUMENTS REQUIRED DOCUMENTATION

All documents in this section shall be completed, signed and submitted with the proposal package.
Harford County Public Schools

Conflict of Interest Disclosure Form

Note: A potential or actual conflict of interest exists when commitments and obligations are likely to be compromised by the evaluator(s)' or project manager’s other material interests, or relationships (especially economic), particularly if those interests or commitments are not disclosed.

This Conflict of Interest Form should indicate whether the evaluator(s) or project manager(s) has an economic interest in, or acts as an officer or a director of, any outside entity whose financial interests would reasonably appear to be affected by the award of a contract or contract evaluation panel. The evaluator or contract manager(s) should also disclose any personal, business, or volunteer affiliations that may give rise to a real or apparent conflict of interest. Relevant Federally and organizationally established regulations and guidelines in financial conflicts must be abided by. Individuals with a conflict of interest should refrain from contract evaluation process.

Date: ______________________________
Name: ___________________________________________
Position: _________________________________________

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

_____ I have no conflict of interest to report.

_____ I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:

1. ___________________________________________________________________________________

2. ___________________________________________________________________________________

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: __________________________________________________________________________

Date: _________________________________________
HARFORD COUNTY PUBLIC SCHOOLS

EMPLOYMENT OF SEX OFFENDERS AND OTHER CRIMINAL OFFENDERS AFFIDAVIT

I AFFIRM THAT:

I am aware of, and the business listed below will comply with, the following requirements of Section §11-722 of the Criminal Procedure Article, and Section §6-113 of the Education Article, Annotated Code of Maryland:

A. Maryland Law requires sex offenders to register with the State and with the local law enforcement agency in the county in which they will reside, work, or attend school. An HCPS contractor agrees and acknowledges that it/he/she is prohibited from knowingly employing an individual to work at a school if the individual is registered as a sex offender pursuant to Section §11-704 of the Criminal Procedures Article of Maryland Code.

B. An HCPS contractor or subcontractor may not knowingly assign an employee to work on school premises with direct, unsupervised, and uncontrolled access to children, if the employee has been convicted of:

1) Section §3-307 of the Criminal Law Article, Maryland Annotated Code, Sexual Offense in the Third Degree;
2) Section §3-308 of the Criminal Law Article, Maryland Annotated Code, Sexual Offense in the Fourth Degree;
3) An offense under the laws of another state that would constitute a violation of Sections §3-307 or §3-308 of the Criminal Law Article if committed in Maryland;
4) Child sexual abuse under Section §3-602 of the Criminal Law Article, Annotated Code of Maryland;
5) An offense under the laws of another state that would constitute child sexual abuse under Section §3-602 of the Criminal Law Article if committed in Maryland;
6) A crime of violence as defined in Section §14-101 of the Criminal Law Article, Annotated Code of Maryland; or
7) An offense under the laws of another state that would constitute a crime of violence under Section §14-101 of the Criminal Law Article if committed in Maryland.

See Section §6-113 of the Education Article, Annotated Code of Maryland

Violations of any of these provisions may result in Termination for Cause.

I AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Date: ___________________

By: _______________________________________ (printed name of Authorized Representative and affiant)

_______________________________________ (signature of Authorized Representative and affiant)

_______________________________________ (Company Name)
STATE OF MARYLAND ANTI-BRIBERY AFFIDAVIT

I HEREBY CERTIFY that:

1. I am the ____________________________ and the duly authorized representative of the firm of ____________________________ whose address is ____________________________ and that I possess the legal authority to make this affidavit on behalf of myself and the firm for which I am acting.

2. Except as described in paragraph 3 below, neither I, nor to the best of my knowledge, the above firm, nor any of its officers, directors or partners, or any of its employees directly involved in obtaining contracts with the State or any county, bi-county, or multi-county agency, or subdivision of the State have been convicted of, or have pleaded nolo contendre to a charge of, or have during the course of an official investigation or other proceeding admitted in writing or under oath acts or omissions committed, which constitute bribery, attempted bribery, or conspiracy to bribe under the provisions of Section 9-201 in the Criminal Law Article of the Annotated Code of Maryland or under the laws of any state or federal government.

3. (State "none" or, as appropriate, list any conviction, plea, or admission described in paragraph 2 above, with the date; court, official, or administrative body; and the sentence or disposition, if any.

____________________________________________________________________________

I acknowledge that this affidavit is to be furnished to the requesting agency, and where appropriate, to the Board of Public Works and the Attorney General under §16-202, S.F. of the Annotated Code of Maryland. I acknowledge that, if the representations set forth in this affidavit are not true and correct, Harford County Public Schools may terminate any contract awarded and take any other appropriate action. I further acknowledge that I am executing this affidavit in compliance with §16-203, S.F. of the Annotated Code of Maryland, which provides that certain persons who have been convicted of or have admitted to bribery, attempted bribery, or conspiracy to bribe may be disqualified, either by operation of law or after a hearing, from entering into contracts with the State or any of its agencies or subdivisions.

I do solemnly declare and affirm under the penalties of perjury that the contents of this affidavit are true and correct.

____________________________________                      ____________________________________
Signature      Witness

____________________
Date
HARFORD COUNTY PUBLIC SCHOOLS
Sean W. Bulson, Ed.D., Superintendent 102 S. Hickory Ave, Bel Air, Maryland 21014

CERTIFICATION REGARDING U.S. GOVERNMENT DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTARY EXCLUSION

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 34 CFR, part 85, Section 85.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988, Federal Register (pages 19160-19211).

(1) The prospective participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

__________________________________________  _________________
Name and Title of Authorized Agency/Organization Representative

___________________________________________________________________________________
Signature                                       Date

___________________________________________________________________________________
Agency/Organization

*Above certification instituted by the U. S. Department of Education for all grantees and subgrantees as of fiscal year 1990.