|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organization** (Please use **entity legal name**)  Click or tap here to enter text. | | | **UEI** (Unique Entity Identifier)[www.sam.gov](http://www.sam.gov)  Click or tap here to enter text. | |
| **Applying for (choose one or both):  Notice of Funding Availability**  **Application for Qualification** (required for applicants who are **not** currently a Worksystems existing CCTP provider) **Choose as many as applicable:**  **Outreach, Recruitment, and Career Coaching  Pre-Apprenticeship Training Program (PATP)  Apprenticeship Retention Services** | | | | |
| **Organization Type**  Non-Profit Organization  Education Institution  Private Organization  Other (Please Specify): Click or tap here to enter text. | | | | |
| **COBID Certification, if applicable:** OR Cert ID Click or tap here to enter text.  Minority, Women, or Disadvantaged Business Enterprise (MBE/WBE/DBE)  Emerging Small Business or Service-Disabled Veteran Business Enterprise (ESB/SDVBE) | | | | |
| **Contact Person**  Click or tap here to enter text. | | | | **Phone Number**  Click or tap here to enter text. |
| **Email Address** (for all correspondence)  Click or tap here to enter text. | **Street Address**  Click or tap here to enter text. | | | |
| I hereby declare that the information provided herein is accurate, valid and a full disclosure of requested information. I am fully authorized to represent the organization listed above, to act on behalf of it, and to legally bind it in all matters related to this application. | | | | |
| **Printed Name**  Click or tap here to enter text. | | **Title**  Click or tap here to enter text. | | |
| **Signature** | | **Date**  Click or tap here to enter text. | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Application Package Submission**  **Instructions:** Check each of the items submitted and submit per the chart below.  with all documents in the order listed and clearly identified.  **Email to RFP@Worksystems.org** | | | |
| **Notice of Funding Submissions requirements** | | | |
|  | **Proposal Submission Item** | **Reference** | **File format** |
|  | Signed Submission Cover Page & Checklist | (This Document) Resource Document on website | PDF |
|  | Proposal Narrative | NOFA Part III, Scopes A and B  Limit to 3 pages per scope | PDF |
|  | Budget Workbook | NOFA Part III, Scopes A and B  Budget Narrative Workbook Resource Document on website | PDF or Excel |
| **Request for Qualifications Submissions requirements ONLY:** | | | |
|  | Signed Submission Cover Page & Checklist | (This Document) Resource Document on website | PDF |
|  | Proposal Narrative | Request for Qualifications Part V, Sections A, B, and C  Limit to 5 pages | PDF |
|  | EEO Report and Plan | Request for Qualifications Part V  **Only required for Registered Apprenticeship submissions** | PDF |
|  | Administrative Capacity Response | Request for Qualifications Part V, Section D  Limit to 5 pages | PDF |
|  | Administrative Capacity Documents | Request for Qualifications Part V, Section D | PDF |
|  | Letter or Agreement of Memorandum of Understanding | Request for Qualifications Part V  LOA or MOU with a construction-related, BOLI registered Pre-Apprenticeship and/or BOLI registered Apprenticeship program **Only required for applicants who are not a BOLI Registered Pre-Apprenticeship or Registered Apprenticeship program** | PDF |