ATTENTION ALL BIDDERS:

NOTICE OF CORRECTIONS

PROGRAM YEAR 2020

SOLICITATION PACKAGE/INVITATION TO BID

WORKFORCE DEVELOPMENT ONE-STOP INTENSIVE CAREER SERVICES AND CASE MANAGEMENT TRAINING SERVICES FOR ADULT, DISLOCATED WORKERS AND YOUTH

CORRECTIONS ARE MADE TO PAGE 43 AND PAGE 48 AS FOLLOWS:

The PROPOSAL COVER SHEET on page 43 has been corrected to include the Proposed Program Performance for Youth to be served as outlined and defined in context of RFP.

Please see ATTACHMENT I below; and

The IMPLEMENTATION SCHEDULE must be completed as part of the proposed level of performance that will occur at each quarter interval during the Program Year for each population ADULT, DISLOCATED WORKER and YOUTH. The Implementation Schedule was omitted from page 48 and has been included in ATTACHMENT II below.

Corrected copies will be made available upon request.

CITY OF COLUMBUS, JOB TRAINING DIVISION WDA 14 ADMINISTRATION

ATTACHMENT I PROPOSAL COVER SHEET

Section VIII. Request for Proposal

PROPOSAL COVER SHEET

I. General Information

Project Activity:

Organization Name and Address:

Telephone Number:

Contact Person:

II. Type of Agency: (Check box(s) that applies)

Non-Profit	For-Profit	
Private	Minority Owned	
Small Business	Female Owned	
Local	Public	

III. Proposed Contract Operation Dates: July 1, 2020 through June 30, 2021

IV. Planned Performance

	Dislocated	
Proposed Program Performance	Worker	Adults
Employment Rate (Q2 post-exit)		
Credential Rate		
Median Earnings		
Employment Rate (Q4 post-exit):		
Measurable Skills Gains		

Proposed Program Performance	Youth
Placement in the 2 nd Qtr. (Q2 post-exit)	
Credential Rate	
Median Earnings	
Placement in the 4 th Qtr. (Q4 post-exit)	
Measurable Skills Gains	

NOTE: Refer to the 'Services Requested (Planning Assumptions) section for the Local Area's Planned Performance Levels. If the proposed performance levels in the proposal vary plus or minus 10% from the local Performance Levels, provide justification on an attached sheet of paper.

Agency Authorized Signature

Date

ATTACHMENT II IMPLEMENTATION SCHEDULE

IMPLEMENTATION SCHEDULE

Please complete the following "Implementation Schedule". This schedule will identify the proposed level of performance that will occur at each quarter interval during the program year.

Numbers identified in each quarter <u>shall be cumulative</u> with the 4th Quarter reflecting full proposed performance for the period which your agency would be judged.

IMPLEMENTATION SCHEDULE - ADULT

	1 st	2 nd	3 rd	4th
Registrants Served	Quarter	Quarter	Quarter	Quarter
1. New Enrollments				
2. Total Served				
3. No. Leaving Program				
4. Positive Terminations				

IMPLEMENTATION SCHEDULE – DISLOCATED WORKER

	1 st	2 nd	3 rd	4th
Registrants Served	Quarter	Quarter	Quarter	Quarter
1. New Enrollments				
2. Total Served				
3. No. Leaving Program				
4. Positive Terminations				

IMPLEMENTATION SCHEDULE - YOUTH

	1 st	2 nd	3 rd	4th
Registrants Served	Quarter	Quarter	Quarter	Quarter
1. New Enrollments				
2. Total Served				
3. No. Leaving Program				
4. Positive Terminations				

DEFINITIONS

- 1. **New Enrollments** A WIOA Eligible individual for whom enrollment documents have been completed and entered into the State reporting system (operated by the Job Training Division).
- 2. **Total Served** The total number of documented individuals served during the quarter (to include carry overs from previous Program Year).
- 3. **Number Leaving Program** Total number of individuals that have exited the program (both positively and negatively) during the quarter.
- 4. **Positive Terminations** Of the total number of individuals that have exited the program during the quarter, list the total number of individuals with successful completions during the quarter.