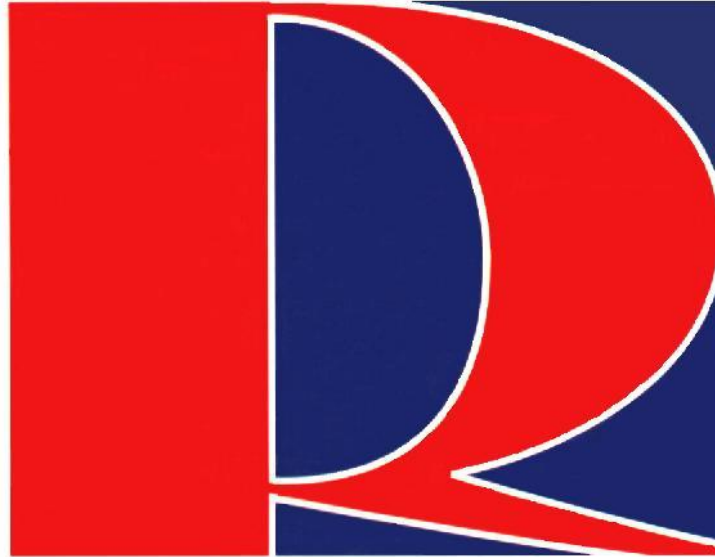


# **REQUEST FOR PROPOSAL**



**RAYTOWN  
QUALITY  
SCHOOLS**  
Expect the Exceptional

**FOR  
Preferred Alternate Transportation Provider  
for McKinney-Vento Students**

**TO BEGIN: July 13, 2021**

**Submittal Deadline: August 2, 2021**

RAYTOWN C-2 SCHOOL DISTRICT  
6608 Raytown Road  
Raytown, MO 64133  
816-268-7000

## REQUEST FOR PROPOSAL

### Preferred Alternate Transportation Provider for McKinney-Vento Students

#### Purpose

The Raytown C-2 School District is seeking a preferred alternate transportation provider for McKinney-Vento students. The District seeks to retain the services of a company that will provide transportation for students between school and their residence.

#### Proposal Guidelines

##### Response:

The Raytown C-2 School District requires a preferred alternate transportation provider for McKinney-Vento students with the capacity to transport between 25 - 55 students living outside of the Raytown School District boundaries and occasionally up to 10 students living within district boundaries. The District also requires the resource to provide transportation services for after school and/or weekend school activities in which students may choose to participate.

##### Cost:

Selection shall be made of the company deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included in the Request for Proposal (RFP), including price, if so stated in the proposal. Negotiations shall be conducted with the selected company. Price shall be considered, but need not be the sole determining factor. While we are not holding any company to a "not to exceed" amount, we do expect the company to be specific as to cost per trip, cost per mile, multiple student charge, and no shows).

##### Response Deadline:

**To be postmarked *on or before August 2, 2021*** by Mail delivery to the following address:

Raytown Quality Schools  
Attn: Victoria Denney  
10750 E. 350 Highway  
Raytown, Missouri 64138

OR

Electronically to the following email address: [victoria.denney@raytownschools.org](mailto:victoria.denney@raytownschools.org)

**Selection Criteria:**

The district is seeking a preferred alternate transportation provider for McKinney-Vento students. The preferred alternate transportation provider for McKinney-Vento students should be properly licensed under the laws governing their respective trades and be insured for the required work. Proof of insurance must be provided with the proposal. The District must receive confirmation all drivers and vehicles are in compliance with all state and federal laws and/or guidelines governing student transportation.

Additional selection criteria include the following expectations for the provider:

- Route and start transportation by the second business day following receipt of the transportation request.
- Ensure on time arrival and pick up with a route no longer than 40 minutes in length.
- Communicate to the District the provider policy and process when there are issues regarding the safety of students while riding in the cab or if the cab becomes involved in an accident.
- Communicate with the District the policy and process of parent notification of service and ongoing transportation changes.
- Invoice both the District and the originating district each 50/50 of the cost of transportation, with an itemized breakdown of each student, trip, and mileage.

**Award:**

Selection shall be issued to the company meeting the global needs of the students in the Raytown School District. Award shall be made to the company meeting the established selection criteria. Selection shall be made of the company deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included in the RFP, including price. Price shall be considered, but need not be the sole determining factor.

**General District Information****District Facilities & Student Population:**

The district has a total of 2 high schools, 3 middle schools, 10 elementary schools, 2 pre-k schools, 1 career center, 1 school for students with exceptional needs, and 1 alternative school. The Raytown C-2 School District's enrollment is approximately 8,500 students Pre-Kindergarten through grade 12. There are three primary diverse populations: African American (49%), Caucasian (28%), and Hispanic (13%). The free and reduced lunch rate for the District is 65% with a mobility rate of approximately 20%. Currently, 15% of students receive special educational services.

Additional information on the District may be obtained by visiting the District's web site at [www.raytownschools.org](http://www.raytownschools.org), and visiting the Department of Elementary and Secondary Education at [www.dese.state.us.mo](http://www.dese.state.us.mo) and reviewing school data and statistics.

**Information Requested****1. Agency/Personnel Information:**

A. Identify the name of the company or agency submitting this response and state the address of the business location from which the District account will be managed.

B. Provide a list of all personnel who will be working on the District account, including the primary contact person, and include the business location of each person, and a summary of each person's duties and responsibilities on the account.

**2. School District Experience:**

A. Provide a list of school districts in the state of Missouri, and specifically in the Kansas City area, for whom your company has been awarded a full preferred alternate transportation provider for McKinney-Vento students contract: (1) the name of the contact person with the district and their telephone number; (2) the names of those districts for whom your company has been awarded other instructional programs.

B. Provide the same information for districts outside the state of Missouri and, as additional information, include in your response the size of each such district by student and staff population.

**3. Response to the Selection Criteria**

A. Provide a comprehensive narrative and provide any relative policy attachments in order to fully respond to the selection criteria.

**ACKNOWLEDGMENT**

By signing this Acknowledgement, the Company is hereby agreeing to the terms and expectations outlined in this proposal package.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Entity Name \_\_\_\_\_

Date \_\_\_\_\_

Preferred Alternate Transportation Provider  
for McKinney-Vento Students  
RFP

**RFP Attachment #1**

**Company/Agency Information:** Identify the name of the company or agency submitting this response and state the address of the business location from which the District account will be managed. This will be considered your company/agency approval for the RFP submittal information included as attachments.

I {We} are proposing in accordance with the general conditions and established specifications.

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

FEDERAL TAX ID #: \_\_\_\_\_

WEB SITE: \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

\_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

Print/Typed

AUTHORIZED SIGNATURE: \_\_\_\_\_

Signed

DATE: \_\_\_\_\_

Preferred Alternate Transportation Provider  
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RFP

**Attachment #2**

**List of All Personnel** who will be working on the District account, including the primary contact person, and include the business location of each person, and summary of each person's duties and responsibilities on the account.

Proposer's Name: \_\_\_\_\_

Proposer's Address: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

Title/Responsibility: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title/Responsibility: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title/Responsibility: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Preferred Alternate Transportation Provider  
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**Attachment #3**

**School District Experience:** Provide the attached list of company references within Missouri with an emphasis on the Kansas City area and/or any state.

**#1 SCHOOL NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE ZIP \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

TIME WORKED \_\_\_\_\_

**#2 SCHOOL NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE ZIP \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

TIME WORKED \_\_\_\_\_

**#3 SCHOOL NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE ZIP \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

TIME WORKED \_\_\_\_\_