

GREENWICH PUBLIC SCHOOLS
Purchasing Department
290 Greenwich Avenue
Greenwich, Connecticut 06830
(203) 625-7411
eugene_watts@greenwich.k12.ct.us

EUGENE H. WATTS
Manager of School Procurement

May 5, 2025

Dear Sir/Madam:

You are invited to submit a proposal for the 8th Grade Washington DC Trip for the Greenwich Public School District. The attached proposal specifications detail the requirements we are looking for.

Proposers are urged to read all documents carefully and fill out all information requested. Proposals which are incomplete, obscure, or conditional, and which contain irregularities of any kind, will be subject to rejection for failure to comply strictly with these conditions.

Proposals must be submitted on the schedule form attached hereto. All unit prices must be filled in. Each proposal must be submitted with (1) original copy/set, and five (5) copies/sets of the proposal. Proposers must submit proposals in a clear, concise and legible manner to permit proper evaluation of responsive proposal. Faxed or emailed proposals will not be accepted however, hand delivered, mailed or overnight proposals will be accepted Monday through Friday between the hours of 8:00 am 12:00 pm and 1:00 pm - 3:30 pm in the Central Receiving Department located in the Arch Street parking lot, or by mail. The original proposal and copies must be in a sealed envelope plainly marked:

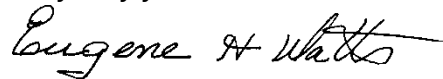
8th Grade Washington DC Trip RFP
Opening Date: 5/30/25
Opening Time: 11:00 a.m.
RFP Number: 2531-25

The details to join the proposal opening remotely are as follows:

Dial-In by phone: 1 405-655-8622
PIN: 707 491 420#

All Proposers and other interested people are invited to call in to hear RFP 2531-25 being read at 11:00 a.m.

Very truly yours,



Eugene H. Wat

Request for Proposal
for a
3-Day 2-Night Educational Experience in
Washington DC

for all 8th Grade Students
in the Greenwich Public Schools



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Background

The Town of Greenwich, CT is about 30 miles northeast of New York City and has a population of about 60,000 people. The Greenwich Public Schools enjoy a national reputation for excellence. Our fifteen public schools have approximately 8500 students and consist of eleven elementary schools (K-5), three middle schools (6-8), and one comprehensive high school (9-12). Our district also offers some Pre-K and alternative high school programs.

Our district has been sending our 8th Grade students on a multi-day field trip to Washington DC for decades, only breaking from that tradition during the COVID years. This trip is seen as an essential culminating experience for the students' Middle School years. It has both social value and academic value, with certain sites in the Washington DC area used to reinforce the Middle School curriculum.

For many years, the trip was paid by the parents / guardians of the students. In recognition of the potential for inequity, the district, in conjunction with the parents, teachers, and parent teacher associations at the 3 Middle Schools determined that an approach was required that ensures that every child had the opportunity to participate in the experience, regardless of the students' financial situation.

A parent-led "8th Grade DC Trip Scholarship Fund Committee" was formed in cooperation with the Greenwich Alliance for Education and the Greenwich PTA Council to fundraise to ensure there is financial resources available to allow every student who wants to attend the Washington DC experience to be able to do so. This is a significant undertaking.

While Greenwich CT often appears on lists of wealthy communities in the US, we are in fact a very diverse community by all measures, including economically. Federal census data indicates that 4-5% of our population are at or below Federal poverty guidelines; however, approximately 17% of our students qualify for Free and Reduced Lunch benefits, and approximately 22% of all families are identified as "Asset Limited, Income Constrained but Employed" (ALICE).

The 8th Grade DC Trip Scholarship Fund committee works directly with each of the Greenwich Middle School Administrations and is coordinating this RFP.

The 8th Grade DC Trip Scholarship Fund committee and the GPS Middle Schools are seeking proposals for a scholastic travel provider for a field trip to Washington DC in the Spring of 2026. We seek a rich and fulfilling academic and social experience for every 8th Grader, with good value for price and cost/price stability that will enable this 8th grade field trip tradition to continue for many more years.

Requirements

Please respond to bid_department@greenwich.k12.ct.us on or before **May 16th 2025** to confirm that you will or will not be responding to this RFP. Include the name and contact information for the single point of contact person who we will be working with throughout the RFP / Proposal process.

Questions concerning this RFP will be received by e-mail only directed to the GPS Bid Department at: (bid_department@greenwich.k12.ct.us). In the subject line you must put "RFP #2531-25 8th Grade Washington DC Trip." All questions must be received no later than noon **May 14, 2025**. All answers will be posted as an addendum to our website, www.greenwicschools.org no later than noon on **May 20, 2025**. Failure to comply with these conditions will result in the proposer waving his/her right to dispute the RFP specifications and conditions. It is the proposer's responsibility to check our website for all addenda up to the day before the opening date.

RFP responses must include

- Proposed itinerary of site visits in and around Washington DC
- Transportation to and from Washington DC and each of the 3 Middle Schools in Greenwich CT.
- Proposed and alternate hotel accommodations in Washington DC
- Proposed dates for each of the 3 Middle Schools

The Greenwich Public Schools have 3 Middle Schools:

- Western Middle School with 176 8th grade students,
- Central Middle School with 169 8th grade students,
- Eastern Middle School with 252 8th grade students.

Each Middle School will go to Washington DC as a single group. There is no expectation that all 3 of the Middle Schools will travel at the same time.

These trips occur in the Spring, typically in May. We ask you to provide tentative dates for the 3 trips in your response. Those proposed dates should be dates that you can support, but the vendor who wins the bid will work with each of the 3 middle schools to determine the final actual dates for the trips.

The trips must begin and end during the week only, we cannot accommodate weekends. The travel to and from Washington DC must be done using coach buses. We are unable to accept any other form of transportation.

All of the students and teachers in each of the 3 individual Middle School groups must stay at the same hotel and the hotel should be no more than 45 minutes from the Mall in Washington DC. The hotel(s) must be safe, clean and hygienic. We do not require that all of the Middle Schools stay at the same hotel, but we do require that the hotels have parity in the quality of the accommodations and food, and location.

The students can be accommodated up to 4 students in each hotel room. The school administrators will determine which students share a room. Each hotel room must have enough bed space (beds, cots, fold out sleeper sofas) to accommodate each student. A maximum of 2 students can share a bed, as long as the shared bed is a double size or larger. We will not allow students to be made to sleep in public spaces, on the floor, or on other furniture.

Teachers from the Greenwich Middle Schools will accompany the students throughout the trip, including being on the buses with the students, staying in the same hotel, and leading the visits to the locations on the itinerary. Your proposal should include hotel and meals for teachers, with no more than 2 teachers per hotel room. In the Response Matrix below, please indicate how many teachers per the number of students are included in your proposed pricing.

To give the GPS teachers a respite and a good night's sleep, your proposal must include "night chaperones" staff that you provide who are not expected to actively engage with students, but who will monitor student movements and safety in the hotel overnight. In the Response Matrix below, please indicate the criteria you use to determine how many night chaperones will be provided (e.g., based on number of students, number of rooms, number of floors occupied in the hotel, etc.).

While it is not a requirement, we seek to have each of the teacher chaperones provided with a small (e.g., \$100) stipend to cover incidental expenses. This can be as simple as a passthrough that is added on to the cost per student.

While splitting each of the Middle School 8th Grade groups into sub-groups is understood to sometimes be necessary for managing visits to various sites in the Washington DC area, this field trip provides a highly valued social aspect for the 8th Grade class as they prepare to move on to High School. Your proposal must include the following:

- Breakfast for all students. It is preferred that breakfast (and potentially other meals) will be able to accommodate the whole group simultaneously, or that there will be a minimal number of separate meal groups.
- At least one social event, preferably in the evening so that it does not interfere with the educational aspects of the itinerary, that includes every student in the Middle School 8th Grade class. The social event must not include co-mingling with other groups.

We require that the tour guides be friendly, experienced, flexible and knowledgeable about the sites/venues that are visited.

We intend to select a vendor/provider that will be a partner for multiple years. We will consider 1 year or multi-year contracts. However, we require that the contract will allow for the Greenwich Public Schools to exit the contract / relationship without penalty if there are issues related to the delivery or execution of any aspect of these RFP requirements, the transportation & accommodations, the quality and availability of meals, the quality of the delivery/execution of the itinerary as proposed, or for any incidents that risk the safety, security, and wellbeing of any student or teacher.

Security Requirements for Field Trips

During overnight trips the students and teacher chaperones must be on the same floor and the teachers' rooms should be in as close proximity as possible to the student rooms.

When traveling on public transportation (buses, commuter trains, subways, etc.) students should be seated together as a group, in proximity to chaperones. Students should not sit comingled with passengers who are not part of the field trip.

Attendance should be taken at each leg of the field trip, i.e. departure from school, arrival at the transportation hub, after boarding the bus, arrival at the event or accommodations, prior to and upon return from excursions.

Insurance Requirement Sheet

Insurance Requirements: Before starting and until final completion and acceptance of the work called for in the Contract and expiration of the guarantee period provided for in the Contract, the Contractor and its subcontractors, if any, shall procure and maintain insurance of the types and amounts checked in paragraphs A through F below for all Contract operations.

- ☒ A. General Liability, with minimum coverages for combined bodily injury and property damage liability of \$2,000,000 general aggregate, \$1,000,000 per occurrence including:
- ☒ 1. Commercial General Liability.
 - ☒ 2. Town as additional insured.
 - ☐ 3. Owners and Contractors Protective Liability (separate policy in the name of the Town).
- ☒ B. ****** Comprehensive Automobile Liability, with minimum coverages of \$10,000,000 combined single limit for bodily injury and property damage, including, where applicable, coverage for any vehicle, all owned vehicles, scheduled vehicles, hired vehicles, non-owned vehicles and garage liability.**
- ☒ C. Excess Liability, with minimum coverage of \$5,000,000 in umbrella form, or such other form as approved by Town Department Head and Risk Management Director.
- ☒ D. Workers' Compensation and Employer's Liability, with minimum coverages as provided by Connecticut State Statutes.
- ☐ E. Professional Liability (for design and other professionals for Errors and Omissions), with minimum coverage of \$1,000,000. If the policy is on a claims-made basis, coverage shall be continually renewed or extended for three (3) years after work is completed under the Contract.
- ☐ F. Other (Builder's Risk, etc.): _____.
- ☒ G. CERTIFICATE HOLDER: TOWN OF GREENWICH & Greenwich Public Schools
(Also fill in on ACORD Certificate of Insurance)
101 Field Point Road, Greenwich, CT 06830.

The Acord certificate of insurance form must be executed by your insurance agent/broker and returned to this office. Company name and address must conform on all documents including insurance documentation. It is required that the agent/broker note the individual insurance companies providing coverage, rather than the insurance group, on the Acord form. The Contract number (provided to the awarded Contractor), project name and a brief description must be inserted in the "Description of Operations" field. It must be confirmed on the Acord Form that Greenwich PTA Council, the Western, Central & Eastern Middle School PTA'S, the Greenwich Alliance for Education, the Town of Greenwich & Greenwich Public Schools are endorsed as an additional insured by having the appropriate box checked off and stating such in the "Description of Operations" field. A letter from the awarded vendor's agent/broker certifying that the Greenwich PTA Council, the Western, Central & Eastern Middle School PTA'S, the Greenwich Alliance for Education, the Town of Greenwich & Greenwich Public Schools are listed as additional insured have been endorsed onto the general liability policy as an additional insured is also mandatory. If the insurance coverage required is provided on more than one Acord certificate of insurance, then additional endorsement letters are also required. Contract development will begin upon receipt of complete, correct insurance documentation.

The Contractor shall be responsible for maintaining the above insurance coverages in force to secure all of the Contractor's obligations under the Contract with an insurance company or companies with an AM Best Rating of A:VII or better, licensed to write such insurance in Connecticut and acceptable to the Risk Manager, Town of Greenwich. For excess liability only, non-admitted insurers are acceptable, provided they are permitted to do business through Connecticut excess line brokers per listing on the current list of Licensed Insurance Companies, Approved Reinsurers, Surplus Lines Insurers and Risk Retention Groups issued by the State of Connecticut Insurance Department.

******The Comprehensive Automobile Requirements are required to be supplied by the Coach Bus Company the travel agency will be utilizing to transport the Greenwich Public Schools students. The travel agency is not required to carry**

automobile insurance for this proposal, however, the proposer is required to supply the Acord Certificate of Insurance from the coach bus company being hired.

(SAMPLE ENDORSEMENT LETTER)

**AGENT/BROKER
(LETTERHEAD)**

(Date)

Eugene H. Watts, Senior Buyer
Purchasing Department
Town of Greenwich/Board of Education
290 Greenwich Avenue – Havemeyer Building
Greenwich, CT 06830

Re: Project Name: _____ **Contract #**

Dear Mr. Watts:

The undersigned hereby certifies as follows:

- (1) I am a duly licensed insurance agent under the laws of the State of **[insert State]** and an authorized representative of all companies affording coverage under the Acord form submitted herewith;
- (2) Greenwich PTA Council, the Western, Central & Eastern Middle School PTA’S, the Greenwich Alliance for Education, the Town of Greenwich & Greenwich Public Schools have been endorsed as additional insured under the general liability policy no. [insert policy number], issued by **[insert company affording coverage] to [name of insured];**
- (3) The general liability policy referenced in paragraph (2) above meets or exceeds the coverage in Commercial General Liability ISO form CG 00 01 10 01, including contractual liability;
- (4) The policies listed in the Acord form submitted to the Town of Greenwich in connection with the above-referenced contract have been issued to the insured in the amounts stated and for the periods indicated in the Acord form; and
- (5) The Town of Greenwich shall be given thirty (30) days prior written notice of cancellation, lapse or restrictive amendment (except ten days notice of nonpayment) of the policies listed in the Acord form.

Sincerely,

Authorized Representative for all companies listed in the Acord form

PRODUCER		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
		INSUREERS AFFORDING COVERAGE			
# _____		Contract INSURER A: INSURER B: INSURER C: INSURER D: INSURER E:			
COVERAGES					
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OF CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INSURER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE(MM/DD/YY)	POLICY EXPIRATION DATE(MM/DD/YY)	LIMITS
	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☒ OCCUR ☐ ☐ GENERAL AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC				EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE \$2,000,000 PRODUCTS-COMP/OP AGG
	AUTOMOBILE LIABILITY ☐ ANY AUTO ALL OWNED AUTOS ANY PROPRIETOR/PARTNER/EXECUTIVE SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS ☐ ☐				COMBINED SINGLE LIMIT \$10,000,000 (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	GARAGE LIABILITY ☐ ANY AUTO ☐				AUTO ONLY-EA ACCIDENT OTHER THAN EA ACC AUTO ONLY: AGG
	EXCESS LIABILITY ☐ OCCUR ☐ CLAIMS MADE ☐ DEDUCTIBLE ☐ RETENTION \$				EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y/N OFFICER/MEMBER EXCLUDED? ☐ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATION				☒ PER STATUTE ☐ OTHER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE – POLICY LIMIT
	Professional Liability				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS					
Greenwich PTA Council, the Western, Central & Eastern Middle School PTA'S, the Greenwich Alliance for Education, the Town of Greenwich & Greenwich Public Schools are listed as additional insured for Contract # _____. It is agreed by both parties to Contract # _____ that the Contractors insurance will be primary and non-contributory					
CERTIFICATE HOLDER		X ADDITIONAL INSURED; INSURER LETTER: ____		CANCELLATION	
Town of Greenwich and Greenwich Public Schools 101 Field Point Road Greenwich, CT 06830		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OF REPRESENTATIONS			
		AUTHORIZED REPRESENTATIVE			

RFP Response Matrix

Please indicate responses below

Transportation & Accommodations	Response
List the transportation vendor used to transport students to and from Greenwich CT and Washington DC	
Confirm that the same transportation vendor will transport the students to various locations in Washington DC, or indicate alternate transportation	
Please indicate if the buses and drivers will be in the Greenwich area the night before the trip begins, to ensure that they are available and rested at the departure time	
List the hotel used to house students and teachers in the Washington DC area.	
Please indicate the alternate hotel(s) you use in the event that your primary hotel is not available.	
Please indicate the number of students per hotel room.	
Please indicate if every room will have its own bathroom, with shower.	

Please indicate if you are able to put male students and female students on separate floors, or separate areas of the hotel.	
Please indicate the basis used for determining the number of GPS teachers included in the bid price for meals and accommodations with a maximum of 2 adults per room (for example, 1 GPS teacher per 10 students).	
Please indicate the basis used in determining the number of night chaperone staff that you will provide (for example, 1 night chaperone per hotel floor that has our students).	

Meals

In the rows below:

- Indicate the meals included in your proposal (breakfast, lunch, dinner) for each of the days (Day 1, Day 2, etc.).
- Indicate the venue / restaurant if known, or provide a “typical” example
- Indicate if the proposed breakfast venue(s) accommodate all of the students at the same time. If not, indicate how many students can be accommodated simultaneously.
- Indicate if there is a maximum value / maximum per diem for each meal (and the amount)

	Response	Included in bid price (Y/N)	Available option (indicate Yes or No and include option costs in the Price Proposal)	Not Available
Day 1 (travel to Washington DC) – Lunch or other on-bus/enroute snacks or food				
Day 1 (travel to Washington DC) – Dinner				
Day 2 – Breakfast				
Day 2 – Lunch				
Day 2 – Dinner				
Day 3 (Return to Greenwich CT) – Breakfast				
Day 3 (Return to Greenwich CT) – Lunch				
Day 3 (Return to Greenwich CT) – Other on-bus/enroute snacks or food				

Itinerary	Response
Please indicate the tentative dates and alternate dates you are proposing for the 3 GPS Middle School trips in 2026	
Please indicate your ability to work with the teachers in advance of the trip to make modest adjustments to the daily itinerary for each of the 3 Middle Schools, to accommodate their educational priorities	
Please indicate your ability to make adjustments to the daily itinerary in the event that change is needed (inclement weather, unanticipated closing of a venue, etc.)	

Itinerary				
Please indicate if one or more all-class social events and each of the venues / sites listed below are included in your proposal, or are available options, or are not available with the proposed itinerary				
	Response	Included in bid price (Yes/No)	Available option (indicate Yes or No and include option costs in the Price Proposal)	Not Available
Please indicate the whole-class social event provided in your proposal for each Middle School 8th Grade class.				
The Capitol Building				
Washington Monument				
The White House				
National Archives				
The Holocaust Museum				
The African American Museum				

Arlington National Cemetery				
Smithsonian Museum(s) – please specify				
Mount Vernon				
Ford's Theatre				
Other sites / venues (Please add a row for each)				

Please provide a sample itinerary for	
Day 1	1. Travel from Greenwich CT to Washington DC, 7:00 am to 12:00 pm (example) 2.
Day 2	1.
Day 3	1. 2. Travel from Washington DC to Greenwich CT, 1:00 pm to 6:00 pm (example)

Legal, Risk, and Compliance	Response
Please indicate the criminal and other background checks and vetting used for the people staffed as night chaperones	
Please indicate the criminal and other background checks and vetting used for the people who will act as guides during the trip	
Please indicate the qualifications you use in selecting staff who act as guides	
Please indicate your plan of supervision for monitoring staff who have contact or are in proximity with students	
Please indicate all training you provide to staff (guides, night chaperones, others), which may include but is not limited to: • Safety and emergency training & certifications • Sexual and physical harassment, abuse, molestation training • Anti-discrimination, anti-hate, antisemitism training • Dispute and conflict resolution training • Tour Guide content training • others	

Has your organization ever had an incident which resulted in an allegation of sexual or physical misconduct or abuse or molestation? If yes, describe: a. Was a suit brought against the organization? b. Was the case settled? c. Was the case taken to trial? d. How much money was paid as damages?	
Has your organization ever been sued for breach of contract or any other liability? If yes, please describe the incident(s) and indicate: a. Was the case settled? b. Was the case taken to trial? c. How much money was paid as damages?	

Please provide at least 3 client references that we may contact.	
Reference 1	
Reference 2	
Reference 3	

<u>Insurance Providers</u>	
Please indicate the insurance provider(s) your firm has policies with and whether they have an AM Best Rating of A: VII or better	
Please indicate the insurance provider(s) used by the transportation provider and whether they have an AM Best Rating of A: VII or better	

<u>Insurance Requirement Agreement</u>	Response		Comment (Required for any “No” response)
	YES	NO	
Your firm will procure and maintain General Liability insurance for all contract operations with minimum coverages for combined bodily injury and property damage liability of \$2,000,000 general aggregate, \$1,000,000 per occurrence including: 1. Commercial General Liability. 2. Town as additional insured.			
Your firm, <i>or your partner providing transportation services</i> , will procure and maintain Comprehensive Automobile Liability for all contract operations, with minimum coverages of \$10,000,000 combined single limit for bodily injury and property damage, including, where applicable, coverage for any vehicle, all owned vehicles, scheduled vehicles, hired vehicles, non-owned vehicles and garage liability.			
Your firm will procure and maintain Excess Liability insurance for all contract operations, with minimum coverage of \$5,000,000 in umbrella form, or such other form as approved by Town Department Head and Risk Management Director.			
Your firm will procure and maintain Workers' Compensation and Employer's Liability, with minimum coverages as provided by Connecticut State Statutes.			

Your firm will provide an ACORD Certificate(s) of Insurance with the Greenwich PTA Council, the Western, Central & Eastern Middle School PTA'S, the Greenwich Alliance for Education, the Town of Greenwich & Greenwich Public Schools as named insureds.			
Your Firm acknowledges that you will maintain the above insurance coverages in force to secure all of the Contractor's obligations under the Contract with an insurance company or companies with an AM Best Rating of A: VII or better, licensed to write such insurance in Connecticut and acceptable to the Risk Manager, Town of Greenwich. For excess liability only, non-admitted insurers are acceptable, provided they are permitted to do business through Connecticut excess line brokers per listing on the current list of Licensed Insurance Companies, Approved Reinsurers, Surplus Lines Insurers and Risk Retention Groups issued by the State of Connecticut Insurance Department.			

Your Proposal

Your proposal will be kept confidential. Only the evaluation committee will have access to your proposal and the evaluators will be prohibited from copying or sharing your proposal with anyone outside the committee. The winning proposal will be incorporated into the final contract.

Please submit 3 separate components as your proposal package:

1. The “RFP Response Matrix”
2. Value Proposal
3. Price Proposal

RFP Response Matrix

Please submit your responses to the “RFP Response Matrix” (above) in MS Word format (template provided). Do not submit the “RFP Response Matrix” in Adobe Acrobat (.pdf) format, as that makes it difficult for the evaluation committee to be able to assess.

Value Proposal

Please submit a Value Proposal that provides all the details of the services you provide, the itinerary you propose, and the value differentiators in your proposal. You can submit your Value Proposal in whatever format you feel is most appropriate to convey the value you provide, but please ensure it is not hard for our evaluation committee to access or digest.

We are interested to hear what differentiates your firm’s scholastic travel services, what is unique in the services and itinerary you offer, your experience, your ability to meet and accommodate the requirements expressed in this RFP, and any other value that you can provide.

If your firm provides subsidies or scholarships for students with financial needs, please indicate that in the Value Proposal section of your response, and include the details in your Price Proposal.

Price Proposal

Please submit your “Price Proposal” in MS Excel format (template provided). Do not submit the “Price Proposal” in Adobe Acrobat (.pdf) format, as that makes it difficult for the evaluation committee to be able to analyze it.

Please submit your price proposal separately from your value proposal and your responses to the Requirements Matrix.

Your price proposal should specify / include:

- Total cost for each of the 3 Middle Schools, based on the student counts provided in this RFP.
- Additional costs / discounts for each additional student that raises or lowers the student counts provided in this RFP.
- Any costs not included in your price proposal and the expected amount of each of those costs, including but not limited to gratuities, admission fees, taxes, tolls, facilities charges, surcharges, etc.
- Payment plans you offer for parents paying for their own children.
- All discounts available, which may include:
 - Early sign-up discounts;
 - Discounts for payment in full;
 - Discounts for families with more than 1 child attending the trip;
- Payment plans and discounts you offer for the 8th Grade Field trip Scholarship Fund, which will be

- paying for children with financial needs.
- Subsidies or scholarships your organization provides for students with financial needs.
- Your trip cancellation policies.
- Details on travel/trip insurance offered, including:
 - whether your firm covers this risk or has an insurance partner (and who that is);
 - terms & conditions: covered reasons; exclusions, trip cancellation / trip interruption, etc.
 - benefits: full refund / partial reimbursement; health / medical; evacuation, etc.
 - cost per student.
- Discount tiers you use in determining pricing.
- The contract term you are proposing (1-year, multi-year).
- Discounts available for multi-year contracts.
- Provide pricing indicators showing how prices have increased or decreased over the last 4 years for a trip similar to what is being proposed (2022, 2023, 2024, and this current year).
- Any and all refund policies and/or penalties.
- Provide a sample contract.

Evaluation of Proposals

Evaluation Committee

The evaluation committee will be composed of the principals or designated administrators from each of the 3 Middle Schools, professional teachers who are experienced with the Washington DC trip, and parent representatives from the 8th Grade Field trip Scholarship Committee and/or the PTAs.

Evaluation Process

We will evaluate the “Value Proposal” independent of our evaluation of the price proposal.

We reserve the right, but will not be obligated, to invite vendors/providers to give us a verbal presentation of their proposal.

The Evaluation Committee will forward the winning proposal and up to two alternate proposals to the Greenwich Public Schools procurement department, which will engage with the provider on finalizing a contract.

Confidentiality of the Evaluation Process

Do not attempt to contact district or school administrators, teachers or parents. Any attempt to make contact with individuals may result in your proposal being rejected.

We will not discuss any proposal with anyone other than the vendor/provider who submitted that proposal. We will not be obligated to disclose any details of the winning proposal or any other proposal to any other vendor/provider.

RFP Process Timeline

Our anticipated timeline for this RFP through contract agreement:

Process Step	Tentative Date
RFP Released	May 5 th , 2025
Confirm receipt of the RFP and your intention to respond to the RFP	on or before May 16 th , 2025
Proposals Due	May 30 th , 2025 at 11:00 am
Proposal Evaluation Period, which may include direct follow-ups with providers	May 30 – June 18, 2025
Notification of selected proposal provider and potential alternate(s)	June 23 rd , 2025
Contract negotiations	June 23 – July 21, 2025
Contract completed	On or before July 31 st , 2025

The dates above are tentative, intended to work in conjunction with the Greenwich Public Schools calendar. We will notify all providers of any changes; we will not change due dates to an earlier date.

COST SHEET

RFP #2531-25

Total cost for each of the 3 Middle Schools, based on the student counts provided in this RFP.

CMS _____

EMS _____

WMS _____

Firm Name: _____

~~~ END ~~~

**8<sup>th</sup> Grade Washington DC Trip RFP**

Response Matrix Template

May 5, 2025

This Template is being provided to facilitate submitting the Response Matrix part of your proposal in MS Word format.

## Response Matrix Template

In Response to the Greenwich Public Schools RFP  
for a 3-Day 2-Night Educational Experience  
in Washington DC  
for all 8<sup>th</sup> Grade Students



THE GPS 8TH  
GRADE DC TRIP  
SCHOLARSHIP  
FUND

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## RFP Response Matrix

Please indicate responses below

| <b>Transportation &amp; Accommodations</b>                                                                                                                                  | <b>Response</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| List the transportation vendor used to transport students to and from Greenwich CT and Washington DC                                                                        |                 |
| Confirm that the same transportation vendor will transport the students to various locations in Washington DC, or indicate alternate transportation                         |                 |
| Please indicate if the buses and drivers will be in the Greenwich area the night before the trip begins, to ensure that they are available and rested at the departure time |                 |
| List the hotel used to house students and teachers in the Washington DC area.                                                                                               |                 |
| Please indicate the alternate hotel(s) you use in the event that your primary hotel is not available.                                                                       |                 |
| Please indicate the number of students per hotel room.                                                                                                                      |                 |
| Please indicate if every room will have its own bathroom, with shower.                                                                                                      |                 |

|                                                                                                                                                                                                                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Please indicate if you are able to put male students and female students on separate floors, or separate areas of the hotel.                                                                                       |  |
| Please indicate the basis used for determining the number of GPS teachers included in the bid price for meals and accommodations with a maximum of 2 adults per room (for example, 1 GPS teacher per 10 students). |  |
| Please indicate the basis used in determining the number of night chaperone staff that you will provide (for example, 1 night chaperone per hotel floor that has our students).                                    |  |

**Meals**

In the rows below:

- Indicate the meals included in your proposal (breakfast, lunch, dinner) for each of the days (Day 1, Day 2, etc.).
- Indicate the venue / restaurant if known, or provide a “typical” example
- Indicate if the proposed breakfast venue(s) accommodate all of the students at the same time. If not, indicate how many students can be accommodated simultaneously.
- Indicate if there is a maximum value / maximum per diem for each meal (and the amount)

|                                                                                      | Response | Included in<br>bid price<br>(Y/N) | Available option<br>(indicate Yes or<br>No. Include<br>option costs in<br>the Price<br>Proposal) | Not<br>Available |
|--------------------------------------------------------------------------------------|----------|-----------------------------------|--------------------------------------------------------------------------------------------------|------------------|
| Day 1 (travel to Washington DC) –<br>Lunch or other on-bus/enroute<br>snacks or food |          |                                   |                                                                                                  |                  |
| Day 1 (travel to Washington DC) –<br>Dinner                                          |          |                                   |                                                                                                  |                  |
| Day 2 – Breakfast                                                                    |          |                                   |                                                                                                  |                  |
| Day 2 – Lunch                                                                        |          |                                   |                                                                                                  |                  |
| Day 2 – Dinner                                                                       |          |                                   |                                                                                                  |                  |
| Day 3 (Return to Greenwich CT) –<br>Breakfast                                        |          |                                   |                                                                                                  |                  |
| Day 3 (Return to Greenwich CT) –<br>Lunch                                            |          |                                   |                                                                                                  |                  |
| Day 3 (Return to Greenwich CT) –<br>Other on-bus/enroute snacks or<br>food           |          |                                   |                                                                                                  |                  |

| Itinerary                                                                                                                                                                                                     | Response |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| Please indicate the tentative dates and alternate dates you are proposing for the 3 GPS Middle School trips in 2026                                                                                           |          |
| Please indicate your ability to work with the teachers in advance of the trip to make modest adjustments to the daily itinerary for each of the 3 Middle Schools, to accommodate their educational priorities |          |
| Please indicate your ability to make adjustments to the daily itinerary in the event that change is needed (inclement weather, unanticipated closing of a venue, etc.)                                        |          |

Please indicate if one or more all-class social events and each of the venues / sites listed below are included in your proposal, or are available options, or are not available with the proposed itinerary

|                                                                                                                | Response | Included in<br>bid price<br>(Yes/No) | Available option<br>(indicate Yes or<br>No and include<br>option costs in<br>the Price<br>Proposal) | Not<br>Available |
|----------------------------------------------------------------------------------------------------------------|----------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------|
| Please indicate the whole-class social event provided in your proposal for each Middle School 8th Grade class. |          |                                      |                                                                                                     |                  |
| The Capitol Building                                                                                           |          |                                      |                                                                                                     |                  |
| Washington Monument                                                                                            |          |                                      |                                                                                                     |                  |
| The White House                                                                                                |          |                                      |                                                                                                     |                  |
| National Archives                                                                                              |          |                                      |                                                                                                     |                  |
| The Holocaust Museum                                                                                           |          |                                      |                                                                                                     |                  |
| The African American Museum                                                                                    |          |                                      |                                                                                                     |                  |
| Arlington National Cemetery                                                                                    |          |                                      |                                                                                                     |                  |
| Smithsonian Museum(s) – please specify                                                                         |          |                                      |                                                                                                     |                  |

|                                                     |  |  |  |  |
|-----------------------------------------------------|--|--|--|--|
| Mount Vernon                                        |  |  |  |  |
| Ford's Theatre                                      |  |  |  |  |
| Other sites / venues<br>(Please add a row for each) |  |  |  |  |

|                                       |                                                                                                                                           |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Please provide a sample itinerary for |                                                                                                                                           |
| • Day 1                               | <ol style="list-style-type: none"> <li>1. Travel from Greenwich CT to Washington DC, 7:00 am to 12:00 pm (example)</li> <li>2.</li> </ol> |
| • Day 2                               | <ol style="list-style-type: none"> <li>1.</li> </ol>                                                                                      |
| • Day 3                               | <ol style="list-style-type: none"> <li>1.</li> <li>2. Travel from Washington DC to Greenwich CT, 1:00 pm to 6:00 pm (example)</li> </ol>  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>Legal, Risk, and Compliance</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Response |
| Please indicate the criminal and other background checks and vetting used for the people staffed as night chaperones                                                                                                                                                                                                                                                                                                                                                                       |          |
| Please indicate the criminal and other background checks and vetting used for the people who will act as guides during the trip                                                                                                                                                                                                                                                                                                                                                            |          |
| Please indicate the qualifications you use in selecting staff who act as guides                                                                                                                                                                                                                                                                                                                                                                                                            |          |
| Please indicate your plan of supervision for monitoring staff who have contact or are in proximity with students                                                                                                                                                                                                                                                                                                                                                                           |          |
| Please indicate all training you provide to staff (guides, night chaperones, others), which may include but is not limited to: <ul style="list-style-type: none"> <li>• Safety and emergency training &amp; certifications</li> <li>• Sexual and physical harassment, abuse, molestation training</li> <li>• Anti-discrimination, anti-hate, antisemitism training</li> <li>• Dispute and conflict resolution training</li> <li>• Tour Guide content training</li> <li>• others</li> </ul> |          |
| Has your organization ever had an incident which resulted in an allegation of sexual or physical misconduct or abuse or molestation?                                                                                                                                                                                                                                                                                                                                                       |          |

|                                                                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>If yes, describe:</p> <p>a. Was a suit brought against the organization?</p> <p>b. Was the case settled?</p> <p>c. Was the case taken to trial?</p> <p>d. How much money was paid as damages?</p>                                                                  |  |
| <p>Has your organization ever been sued for breach of contract or any other liability? If yes, please describe the incident(s) and indicate:</p> <p>a. Was the case settled?</p> <p>b. Was the case taken to trial?</p> <p>c. How much money was paid as damages?</p> |  |

|                                                                  |  |
|------------------------------------------------------------------|--|
| Please provide at least 3 client references that we may contact. |  |
| Reference 1                                                      |  |
| Reference 2                                                      |  |
| Reference 3                                                      |  |

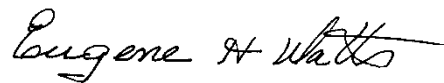
|                                                                                                                                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Insurance Providers</b>                                                                                                                |  |
| Please indicate the insurance provider(s) your firm has policies with and whether they have an AM Best Rating of A: VII or better         |  |
| Please indicate the insurance provider(s) used by the transportation provider and whether they have an AM Best Rating of A: VII or better |  |

| Insurance Requirement Agreement                                                                                                                                                                                                                                                                                           | Response |    | Comment<br>(Required for any “No” response) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----|---------------------------------------------|
|                                                                                                                                                                                                                                                                                                                           | YES      | NO |                                             |
| Your firm will procure and maintain General Liability insurance for all contract operations with minimum coverages for combined bodily injury and property damage liability of \$2,000,000 general aggregate, \$1,000,000 per occurrence including:<br>1. Commercial General Liability.<br>2. Town as additional insured. |          |    |                                             |
| Your firm, <i>or your partner providing transportation services</i> , will procure and maintain Comprehensive Automobile Liability for all contract operations, with minimum coverages of \$10,000,000 combined single limit for bodily injury and                                                                        |          |    |                                             |

|                                                                                                                                                                                                                                                                               |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| property damage, including, where applicable, coverage for any vehicle, all owned vehicles, scheduled vehicles, hired vehicles, non-owned vehicles and garage liability.                                                                                                      |  |  |  |
| Your firm will procure and maintain Excess Liability insurance for all contract operations, with minimum coverage of \$5,000,000 in umbrella form, or such other form as approved by Town Department Head and Risk Management Director.                                       |  |  |  |
| Your firm will procure and maintain Workers' Compensation and Employer's Liability, with minimum coverages as provided by Connecticut State Statutes.                                                                                                                         |  |  |  |
| Your firm will provide an ACORD Certificate(s) of Insurance with the Greenwich PTA Council, the PTAs of the 3 middle schools, the Greenwich Alliance for Education, the Town of Greenwich, and the Greenwich Board of Education & Greenwich Public Schools as named insureds. |  |  |  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| <p>Your Firm acknowledges that you will maintain the above insurance coverages in force to secure all of the Contractor's obligations under the Contract with an insurance company or companies with an AM Best Rating of A: VII or better, licensed to write such insurance in Connecticut and acceptable to the Risk Manager, Town of Greenwich.</p> <p>For excess liability only, non-admitted insurers are acceptable, provided they are permitted to do business through Connecticut excess line brokers per listing on the current list of Licensed Insurance Companies, Approved Reinsurers, Surplus Lines Insurers and Risk Retention Groups issued by the State of Connecticut Insurance Department.</p> |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|

All project requirements, except for those that are specifically added or modified in writing shall remain in full effect.




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Eugene H. Watts

**END OF TEMPLATE**

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Please note that this Pricing Proposal Template has 3 tabs.

Please provide a detailed explanation of payment plans available for parents paying for their own children.

Your response must include any financing costs (fees, interest charges, etc.)

Please provide a detailed explanation of the trip insurance offered, including:
terms & conditions;
benefits - full refund/partial reimbursement; health/medical; evacuation, etc.
covered reasons;
exclusions;
trip cancellation / trip interruption;
etc.

Add additional row(s) for plan / level options

You may include an attachment if required.

Trip insurance costs should be entered on the "Fees, Charges" tab.

Please provide a detailed explanation of your trip cancellation policies.

Please list and explain any and all refund policies and/or penalties.

Please provide a detailed explanation of any pricing / discounting tiers in your pricing models. These might be any pricing / discounting tiers you use, but, an example might be that there are discounts at 100+ students, 200+ students, 300+ students, etc.



Are you proposing a one-year or a multi-year contract?

Please provide a detailed explanation of any pricing / discounting for multi-year contracts, or cost escalations for a one-year contract.



Please provide pricing indicators showing how prices have increased or decreased over the last 3 years for a trip similar to what is being proposed (2022, 2023, and this current year).

Trip cost(s) 2022

These pricing indicators can be shown as total package price or cost / student but please indicate the number of students on the trip

Trip cost(s) 2023

"Trips similar to what is being proposed" would include coach bus transportation, similar quality hotels and meals, essentially the same site visits and social activities, etc. for groups of similar size.

Trip cost(s) 2024

Trip cost(s) Current Year, 2025

Indicate any and all other considerations / variables related to your pricing proposal that we may not have identified (add additional rows as needed)

Please be sure to provide a sample contract as an inclusion with your price proposal.

Comments

End







Please note that this Pricing Proposal Template has 3 tabs.

You may input costs on a per-student or a per-class basis. Please be sure to indicate what basis you are using in the pricing proposal. Note that we may calculate per-student costs and/or per-class totals as needed in our evaluation process, based on the data you provide.

Central Middle School, 169
8th grade students (forecast)

Base cost for each of the 3 Middle Schools, based on proposed transportation, hotels, meals, itinerary and the student counts provided in this RFP.

The Capitol Building

Washington Monument

The White House

National Archives

The Holocaust Museum

Additional costs for itinerary
site visits **not** included in
"Base Costs" above.

The African American Museum

DO NOT enter a cost here if
the site is included in the
"base cost" above

Arlington National Cemetery

Smithsonian Museum(s) –
please specify in "coments"
column

Mount Vernon

Ford's Theatre

Other sites / venues
Add one row below for each
"other" option

Indicate any additioinal costs that are not included in the
"base cost" (above) for the proposed social event(s) that will
include every student in each of the Middle School 8th
Grade classes.

DO NOT enter a cost here if the proposed social event(s)
is/are included in the "base cost" above

| | Cost per additional student |
|--|--|
| Additional costs / discounts
for each additional student
that raises or lowers the
student counts provided in
this RFP | Cost reduction (discount) for
each student below forecast
number |

Day 1 (travel to Washington DC) –
Lunch or other onbus/enroute
snacks or food

Day 1 (travel to Washington DC) –
Dinner

Day 2 – Breakfast

Day 2 – Lunch

Additional costs for meals /

optional meals **not** included
in "Base Costs" above.
DO NOT enter a cost here if
the meal is included in the
"base cost" above

Day 2 – Dinner

Day 3 (Return to Greenwich CT) –
Breakfast

Day 3 (Return to Greenwich CT) –
Lunch

Day 3 (Return to Greenwich CT) –
Other on-bus/enroute snacks or
food

Other meals / food options
Add one row for each "other"
option

Gratuities

admission fees

Any costs not included in
your price proposal and the
expected amount of each of
those costs

taxes

tolls

facilities charges

surcharges,

others (list)

Indicate any additional costs associated with the teacher
chaperones (from the GPS schools) that are not included in
the "base costs" above.

DO NOT enter a cost here if the all costs (transportation,
lodging, meals) associated with the GPS teacher chaperones
are included in the "base cost" above

Trip Insurance
(we expect this is a per
student cost, please use the

Mandatory, required trip
insurance

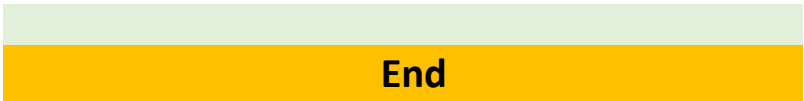
“comment” column to
explain any other model)

Optional trip insurance

Please indicate any and all other costs / fees / charges that
we may not have identified (add additional rows as needed)

Eastern Middle School, 252 Western Middle School, 176
8th grade students (forecast) 8th grade students (forecast)





Comments











Please note that this Pricing Proposal Template has 3 tabs.

Baseline cost per student
(This is only for baseline comparison for the discounts below. We will only use the amounts entered in the "Fees, Charges" tab to evaluate cost / pricing)

Early registration discounts

Early payment discounts

Discounts for students
& families

Discounts for payment in full, in advance

Discounts for families with more than 1 child attending the trip

Other discounts
(add rows for each)

Discounts for students who qualify for a fieldtrip scholarship (financial needs based only)

Discounts applicable
for the 8th Grade Field
Trip Scholarship
Committee

Subsidies or scholarships your
organization will provide directly, for
students with financial needs

Any other discounts or subsidies for
students with financial needs or for the
group, not applicable to students &
families (add additional rows for each)

Please indicate any and all other discounts that we may not have
identified (add additional rows as needed)

Please provide fixed amount (dollars) and/or provide a percentage in one or both of the columns below

Dollar amounts

Percentage

100%



Comments





