



AUTHORIZATION TO ISSUE A REQUEST FOR PROPOSAL & IN-HOUSE "SERVICES" ESTIMATE

The Requesting Department must fill out all areas indicated, obtain both signatures and submit to rharriss@mylusd.org and Cc: gjanson@mylusd.org. (Pgs. 1-4)

Requestor's Name: _____

Requesting Department: _____

Date of the Request: _____

Type of Consultant/Company (Provided by Requesting Department)

☐ LEGAL ☐ FINANCIAL ☐ TECHNICAL ☐ ADVISOR ☐ TRAINING ☐ STUDY

Recommendation to Advertise: (Provided by Requesting Department) - (OPTIONAL)

Check all that apply:

☐ News Paper ☐ District Website
☐ Professional Association Website: Name _____ Email _____

Suggested Contacts (Company Name/Firm)	Email Address	Contact Name	Contact#

(Provided by Requesting Department)

TITLE OF PROJECT: _____

PROJECT MGR: _____

SITE(S) WHERE PROJECT IS NEEDED: _____

COST ESTIMATE FOR THE PROJECT: \$ _____

FUNDING SOURCE: (this information is required for Board Approval): _____

ESTIMATED BOARD APPROVAL DATE: _____

START DATE: _____ COMPLETION DATE: _____



SCOPE OF SERVICES (Provided by Requesting Department)

THE FOLLOWING IS AN EXAMPLE:

The person or firm or company responding to this RFP is able to furnish; all labor, management, know-how, materials, transportation, equipment, financial and accounting resources, and applicable licenses that are required for successfully conducting research and analysis to determine and provide a written report of their recommended findings.

Written Findings must meet the standards of an “Investment Grade Audit,” and include potential energy performance improvements, and estimated cost of improvements.

PERIOD OF PERFORMANCE (Provided by Requesting Department)

Provide a start and end date for the vendor requested services to be completed.

DISTRICT PROVIDED (Provided by Requesting Department)

Identify the Data, Equipment, Facilities, or Access to Lynwood Unified School District Information that the District will provide so the awardee can perform the service we are requesting.

DELIVERABLES (Provided by Requesting Department)

Explain the format (written report; debriefing, i.e., powerpoint presentation) in which you wish the “Deliverables to be provided.

DELIVERABLE SCHEDULE (Provided by Requesting Department)

State when items, training, presentation data or response are due.

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SELECTION PROCESS AND CRITERIA

- a. The selection process will include a review, and evaluation of proposals by District staff, and consultants.
- b. The criteria will be weighted as follows:

Criteria	Weight
Adherence to RFP Instructions	20%
Experience and Past Performance	<u>20%</u> (Provided by Requesting Dept.)
Proposal content that Addresses the Scope of Services	<u>25%</u> (Provided by Requesting Dept.)
Attachment F1. Price/Fees/Rates	35%
Total	100%

(Provided by Requesting Dept.) The entire RFP is limited to _____ pages of Company Marketing Data.

MANDATORY

Department Certification:

I hereby certify that the information provided above is accurate and complete to the best of my knowledge and belief.

Requesting Department Administrator

Date**Supervising Cabinet Level Officer Certification:**

I hereby concur that the information provided above is accurate and complete to the best of my knowledge and belief, and the price is determined to be fair and reasonable as documented.

Cabinet Level Officer

Date

LUSD IN-HOUSE "SERVICES" ESTIMATE

LUSD Requisition # _____ Department: _____

The purpose of this form is to provide an in-house estimate for services. Attach the form to your Requisition in BEST.

Date In-House Estimate was submitted to Purchasing: _____, 20____

Why is the service needed?

Location of Project: _____ Project Name: _____

Account String: _____

Name and Contract Information of LUSD Staff or Company, that provided the Cost Estimate:

Name: _____ Email Address _____ Phone No. _____

NOTE: If Cost Estimate is provided by *consultant or company, then this consultant/company is not allowed to Bid or assist other Bidders in providing a BID proposal on the referenced work.

Contact Person: _____ Email Address: _____

1. **Total Direct Material** – Material which becomes an integral part of this finished Project \$ _____
2. **Total Direct Labor** – Labor which actively and directly takes part in the completion of the Project \$ _____
3. **Total Direct Other Cost** – Cost which is directly traceable to completion of this Project \$ _____
4. **Total Sub-Contractors Cost** – Other companies that directly contribute to completion of this Project \$ _____
5. **Total Direct Project Cost** \$ _____
6. **Total Direct Cost Plus Sub-Contractor's Cost Estimate** \$ _____

Name of Head Department Administrator: _____

Signature of Head Department Administrator: _____ Date: _____

Office Use

Received By: _____ Date received: _____