**State of New Mexico**

**Public Education Department**

**Office of Special Education**

**Company name

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**Request for Application**

**RFA No. RFA-92400-00001**

**RFA Title**

**Call for providers for IDEA B State Level Activity Services**

**Application Packet**

**Required Documents**

Applicants shall submit only one application in response to this RFA. All documents listed below are contained in this packet. Applicants must answer all questions and sections within this RFA packet. Points will be awarded based on the thoroughness and clarity of each response.

1. Cover Sheet
2. Application Response Narrative Form: The Application Response Narrative and all its document requests shall be on separate sheets of paper. The page limit for the application response narrative shall be within 50 pages, single spaced pages, using 12-point easily readable font such as Arial, Courier, or Times New Roman.
3. Geographic Service Area
4. Line-Item Budget Proposal
5. Mandatory Supporting Documentation Requirements

**Proposal Submittal**

All proposals must be submitted as follows:

1. Submit proposals electronically through the following email address:

[**sed.support@ped.nm.gov**](mailto:sed.support@ped.nm.gov)

1. Email Subject Line must include the following in order for the application to be considered valid:

**OSE RFA - RFA-92400-00001 – APPLICANT NAME**

1. Email Attachments must be included as follows in order for the application to be considered:

* Attachment 1 = Cover Sheet
* Attachment 2 = Application Response Narrative Form
* Attachment 3 = Geographic Service Area and Line-Item Budget Proposal
* Attachment 4 = Mandatory Documentation Requirements

**DUE DATE**: Each Applicant must submit the documents listed above in their entirety, **on or before**

**April 25, 2025, 5:00 p.m. MST** for their application to be considered valid. Any applications submitted after 5:00 p.m. MST on 4/25/25 will **NOT** be considered valid.

**Cover Sheet**

**NMPED – OSE RFA No. RFA-92400-00001**

**RFA Title: Call for providers for IDEA B State Level Activity Services**

**Identify the following information for the submitting Applicant**

**Organization Name:**

**Mailing Address:**

**Phone Number:**

**FED EIN ID:**

**(**A federal **Employee Identification Number** **(EIN)** is a federal tax ID number for businesses, tax-exempt organizations and other entities. [Employer identification number | Internal Revenue Service](https://www.irs.gov/businesses/employer-identification-number))

**\*NM CRS#:**

A **New Mexico Combined Reporting System (CRS)** number is a unique New Mexico sales tax number for businesses, also referred to as an NM Tax ID number. [New Mexico CRS Number - Register Online for Sales Tax](https://www.tax-id-bureau.com/new-mexico-crs-number/). \*If you are **not** registered as a Vendor to do business with the State of New Mexico, please contact Lorie Pacheco at [lorie.pacheco@ped.nm.gov](mailto:lorie.pacheco@ped.nm.gov).

**Please identify the authorized individual to contractually obligate the organization**

**Contact Name:** **Title:**

**Email address:** **Phone number:**

**Signature of Applicant**: I hereby certify that I am authorized to sign this application, that all information contained in this application contains no willful misrepresentation and that the information is true and complete to the best of my knowledge.

**Authorized Signature: Date:**

**Name (Print):** **Title:**

**The information on this form must be completed in its entirety and must include an original or digital signature.**

**Applicant Response Narrative Form**

**NMPED – OSE RFA No. RFA-92400-00001**

**Name of Applicant:**

Each Applicant must provide a narrative response using this Response Form. Awards will be considered based on applicant scores.

**SECTION 1: ORGANIZATIONAL CAPACITY**

1. **Background and Experience: Total Point Value: 100 pts**
2. List the Applicant’s mission and values and describe how they are suited to the services/projects proposed in Section 2 Direct Service Provision – **25 pts**
3. Provide a summary of the Applicant’s experience with similar services/projects of those included in Section 2 Direct Service Provision – **25 pts**
4. Describe previous service results. If the Applicant previously provided IDEA B services in Section 2 Direct Service Provision, please describe how these services were provided. – **25 pts**
5. Name the LEAs the Applicant proposes to serve under this agreement. Describe the Applicant’s ability to meet the cultural and linguistic needs of the community it proposes to serve. Include information about unique barriers to service delivery that may exist in the LEA(s) the Applicant proposes to serve. – **25 pts**

**B.** **Organizational Structure and Plan of Operation: Total Point Value: 180 pts**

1. Provide an organizational chart that includes key personnel responsible for administration, finance, program supervision, and direct service provision in Section 2 Direct Service Provision. The organizational chart should identify clearly the key personnel and their role in the organization. – **10 pts**
2. Provide the name, title, qualifications and education level for the following key roles –

**20 pts**

1. Director, Owner, CEO, responsible for oversight of the organization
2. Staff or sub-contractor(s) responsible for training, professional development and technical assistance.
3. Administrative staff responsible for oversight of billing, claims reconciliation, and financial management of the contract award.
4. Provide resume, certification(s) and other related information for everyone on the organizational chart this includes sub-contractors(s) (if applicable).
5. Describe the management structure of the organization, including the chain of supervision – **25 pts**
6. Describe the Applicant’s plan for and/or experience with collaborating with LEAs. - **25 pts**
7. Describe the Applicant’s experience with conducting needs assessments and collecting data. – **25 pts**
8. Describe the Applicant’s comprehensive onboarding system for all new direct service staff, including subcontractor(s). Include detailed information on initial training and support for IDEA B state level activities. - **25 pts**
9. Describe the Applicant’s system of monitoring that applicant staff / subcontractor(s) are providing services in accordance with requirements under IDEA Part B. – **25 pts**
10. Describe the Applicant’s approach to ensuring that all staff, both employed and sub-contracted, attend required trainings and receive the necessary supports for implementing what is described in Section 2 Direct Service Provision. - **25 pts**

**C. Ability to Adhere to the Individuals with Disabilities Education Act (IDEA) Part B as Provided in New Mexico: Total Point Value: 100 pts**

1. Describe the Applicant’s understanding of the purpose and requirements of IDEA Part B as it relates to IDC Indicators, PBIS and Capacity building. - **50 pts**
2. Under IDEA B, there are IDEA Data Center (IDC) Indicators for which LEAs are required to follow and be compliant with. – **50 pts**

Please describe how the applicant will:

* 1. Ensure that what is being provided to the selected LEAs will improve LEA personnel competency in special education regulations and best practices.

1. Increase fidelity of LEAs Implementation evidence-based practices within the Positive Behavioral Interventions and Supports (PBIS) framework.
2. Increase knowledge and competency among LEA personnel in delivering specialized instruction and support services, improve compliance rates with IDEA B regulations and service delivery requirements and enhanced capacity of LEAs to implement evidence-based interventions effectively.

**SECTION 2: DIRECT SERVICE PROVISION**

1. Support and direct services, including technical assistance, personnel preparation, and professional development and training. – **Total Point Value:** **200 pts**
2. Describe the Applicants’ approach to ensuring that the delivery of professional development training programs is tailored to the specific needs of LEAs and focuses on compliance, intervention strategies, and data-driven decision-making. How many times would this be done per Geographic Area selected? – **75 pts**.
3. Describe the applicants’ understanding of each of the following indicators. - **50 pts.**

* Indicator 4: Suspension / Expulsion
* Indicator 9: Disproportionate Representation
* Indicator 10: Disproportionate Representation in Specific Disability Categories.
* Indicator 11: Child Find
* Indicator 12: Early Childhood Transition
* Indicator 13: Secondary Transition

3. Describe how the Applicant would provide tiered levels of training and support for LEAs found non-compliant via an annual determination or monitoring review. – **25 pts**.

4. Describe how the Applicant would offer personnel preparation programs to LEAs, including workshops and certification courses, to enhance the capacity of educators and support staff working with students with disabilities. – **25 pts**.

5. Describe what technical assistance (TA) looks like to an LEA to enhance their capacity in providing high-quality educational services to children with disabilities. – **25 pts**

1. Implementation of positive behavioral interventions and support (PBIS) for students with disabilities (SWD) – **Total Point Value:** **100 pts**
2. Describe the Applicant’s understanding of positive behavioral interventions and supports (PBIS). **– 25 pts**
3. Describe how the Applicant would deliver professional development workshops, webinars, and on-site training sessions for educators, administrators, and support staff for PBIS. **– 25 pts**
4. Describe what TA looks like to an LEA and what evidence-based behavioral interventions and trauma-informed practices the Applicant would use. **– 25** pts
5. Describe the Applicant’s understanding of developing and sustaining a multi-layered system of support (MLSS). **– 25** pts
6. Capacity building activities to strengthen the delivery of services by LEAs to improve academic results of children with disabilities. **Total Point Value:** **50 pts**
7. Describe the Applicant’s understanding of capacity building to improve academic outcomes. – **25 pts.**
8. Describe how the Applicant would strengthen and support LEAs delivery of services while also helping LEAs foster collaboration among other LEAs and stakeholders. – **25 pts**
9. Data Collection & Evaluation Support - **Total Point Value:** **100 pts**
10. Describe how the Applicant would assist LEAs in establishing data collection practices to improve intervention effectiveness and continuous improvement strategies.

**Name of Applicant:**

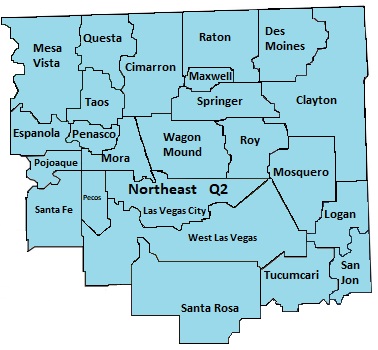
**Geographic Service Area**

**NMPED – OSE RFA No. RFA-92400-00001**

Completion of this form indicates the OSE Quadrant and LEAs the Applicant intends to serve. Please note that this includes not only the LEA but the LEAs District Charter Schools and State Charter Schools within each Quadrant should there be any. Award for additional counties does not require the release of an additional RFA by the Agency during the term of this agreement. List of State Charter Schools: [State Charter School Contracts and Annual Reports – New Mexico Public Education Department](https://webnew.ped.state.nm.us/bureaus/public-education-commission/charter-school-contracts/)

Diagram, map

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| --- | --- |
| **Northwest Q1 LEAs** | **Applying to Serve**  **(Check Box for Yes)** |
| Aztec |  |
| Bernalillo |  |
| Bloomfield |  |
| Central Consolidated |  |
| Chama Valley |  |
| Cuba |  |
| Dulce |  |
| Farmington |  |
| Gallup McKinley |  |
| Grants Cibola |  |
| Jemez Mountain |  |
| Jemez Valley |  |
| Los Alamos |  |
| Rio Rancho |  |
| Zuni |  |

|  |  |
| --- | --- |
| **Northeast Q2**  **LEAs** | **Applying to Serve**  **(Check Box for Yes)** |
| Cimarron |  |
| Clayton |  |
| Des Moines |  |
| Espanola |  |
| Las Vegas City |  |
| Logan |  |
| Maxwell |  |
| Mesa Vista |  |
| Mora |  |
| Mosquero |  |
| Pecos |  |
| Penasco |  |
| Pojoaque |  |
| Questa |  |
| Raton |  |
| Roy |  |
| San Jon |  |
| Santa Fe |  |
| Santa Rosa |  |
| Springer |  |
| West Las Vegas |  |

Map

AI-generated content may be incorrect.

Diagram, map

AI-generated content may be incorrect.

Diagram, map

AI-generated content may be incorrect.

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| **Central Q3**  **LEAs** | **Applying to Serve**  **(Check Box for Yes)** |
| Albuquerque |  |
| Belen |  |
| Estancia |  |
| Los Lunas |  |
| Moriarty |  |
| Mountainair |  |
| Vaughn |  |

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| **Southwest Q4**  **LEAs** | **Applying to Serve**  **(Check Box for Yes)** |
| Animas |  |
| Cobre |  |
| Deming |  |
| Gadsden |  |
| Hatch Valley |  |
| Las Cruces |  |
| Lordsburg |  |
| Magdalena |  |
| Quemado |  |
| Reserve |  |
| Silver City |  |
| Socorro |  |
| Truth or Consequences |  |

|  |  |
| --- | --- |
| **Southeast Q5**  **LEAs** | **Applying to Serve**  **(Check Box for Yes)** |
| Alamogordo |  |
| Artesia |  |
| Capitan |  |
| Carlsbad |  |
| Carrizozo |  |
| Cloudcroft |  |
| Clovis |  |
| Corona |  |
| Dexter |  |
| Dora |  |
| Elida |  |
| Eunice |  |
| Floyd |  |
| Fort Sumner |  |
| Grady |  |
| Hagerman |  |
| Hobbs |  |
| Hondo Valley |  |
| House |  |
| Jal |  |
| Lake Arthur |  |
| Loving |  |
| Lovington |  |
| Melrose |  |
| Portales |  |
| Ruidoso |  |
| Texico |  |
| Tularosa |  |

**Line-Item Budget Proposal**

**NMPED – OSE RFA No. RFA-92400-00001**

**Name of Applicant:**

Please provide a line-item budget for services described in Appendix A. This includes but is not limited to personnel, subcontractor(s), travel, materials and described in the Applicant Response Narratives Form of how the services will be carried out to the proposed LEAs. – **50 pts**

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| **LINE ITME NAME** | **DESCRIPTION** | **AMOUNT** |
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| **SUBTOTAL** | |  |
| **IDC** **%** | |  |
| **TOTAL BUDGET PROPOSAL** | |  |

**Mandatory Supporting Documentation**

**NMPED – OSE RFA No. RFA-92400-00001**

**Name of Applicant:**

**Total Point Value: 120 pts.**

1. Provide a Resume for the person responsible for overseeing the Applicant’s efforts to implement the services in Section 2 Direct Service Provision. Failure to provide the required Resume will result in disqualification of the Application from further consideration. - **20 pts**
2. Provide a completed and signed Campaign Contribution Form, Appendix A in the RFA. This form is also included in this packet. Failure to disclose contributions will result in an automatic disqualification of your application from further consideration. - **25 pts**
3. Describe the Applicant's financial status, include the results of any recent audits, and ability to meet expenditures, including payroll of proposed staff, of up to eight weeks awaiting reimbursement (financial documents are not required to be submitted with the proposal but may be requested later). - **25 pts**
4. Provide a copy of your New Mexico Taxation and Revenue Tax ID Certificate [CRS]. If you are not currently registered forms can be downloaded at:<http://www.tax.newmexico.gov/Businesses/forms-publications.aspx> - **25 pts**
5. Provide a completed and signed Lobbying Certification, Appendix B in the RFA. This form is also included in this packet. Failure to complete will result in an automatic disqualification of your application from further consideration. - **25 pts**

|  |  |
| --- | --- |
| **RFA CRITERIA** | **POINT VALUE** |
| **Cover sheet, Appendix A** | No point value |
| **Applicant Response Narrative** | --- |
| **Organizational Capacity**   1. Background and Experience 2. Organizational Structure and Plan of Operation 3. Ability to Adhere to the Individuals with Disabilities Education Act. | 100  180  100 |
| **Direct Service Provision**   1. Support and direct services, including technical assistance, personnel preparation, and professional development and training 2. Implementation of positive behavioral interventions and support (PBIS) for students with disabilities (SWD). 3. Capacity building activities to strengthen the delivery of services by LEAs to improve academic results of children with disabilities. 4. Data Collection & Evaluation Support | 200  100  50  100 |
| **Line-Item Budget Proposal** | 50 |
| **Mandatory Supporting Documentation** | 120 |
| **Total Points Available** | **1,000** |

The following is a summary of evaluation factors with point values assigned to each. These weighted factors will be used in the evaluation of individual potential Application.

**Evaluation Point Summary**

**NMPED – OSE RFA No. RFA-92400-00001**

**APPENDIX A**

**CAMPAIGN CONTRIBUTION DISCLOSURE FORM**

Pursuant to the Procurement Code, Sections 13-1-28, et seq., NMSA 1978 and NMSA 1978, § 13-1-191.1 (2006), as amended by Laws of 2007, Chapter 234, a prospective contractor subject to this section shall disclose all campaign contributions given by the prospective contractor or a family member or representative of the prospective contractor to an applicable public official of the state or a local public body during the two years prior to the date on which a proposal is submitted or, in the case of a sole source or small purchase contract, the two years prior to the date on which the contractor signs the contract, if the aggregate total of contributions given by the prospective contractor or a family member or representative of the prospective contractor to the public official exceeds two hundred fifty dollars ($250) over the two-year period. A prospective contractor submitting a disclosure statement pursuant to this section who has not contributed to an applicable public official, whose family members have not contributed to an applicable public official or whose representatives have not contributed to an applicable public official, shall make a statement that no contribution was made.

A prospective contractor or a family member or representative of the prospective contractor shall not give a campaign contribution or other thing of value to an applicable public official or the applicable public official's employees during the pendency of the procurement process or during the pendency of negotiations for a sole source or small purchase contract.

Furthermore, a solicitation or proposed award for a proposed contract may be canceled pursuant to Section [13-1-181](http://mobile.nmonesource.com/nxt/gateway.dll?f=jumplink$jumplink_x=Advanced$jumplink_vpc=first$jumplink_xsl=querylink.xsl$jumplink_sel=title;path;content-type;home-title;item-bookmark$jumplink_d=%7bnmsa1978%7d$jumplink_q=%5bfield%20folio-destination-name:'13-1-181'%5d$jumplink_md=target-id=0-0-0-33795) NMSA 1978 or a contract that is executed may be ratified or terminated pursuant to Section [13-1-182](http://mobile.nmonesource.com/nxt/gateway.dll?f=jumplink$jumplink_x=Advanced$jumplink_vpc=first$jumplink_xsl=querylink.xsl$jumplink_sel=title;path;content-type;home-title;item-bookmark$jumplink_d=%7bnmsa1978%7d$jumplink_q=%5bfield%20folio-destination-name:'13-1-182'%5d$jumplink_md=target-id=0-0-0-33797) NMSA 1978 if a prospective contractor fails to submit a fully completed disclosure statement pursuant to this section; or a prospective contractor or family member or representative of the prospective contractor gives a campaign contribution or other thing of value to an applicable public official or the applicable public official's employees during the pendency of the procurement process.

The state agency or local public body that procures the services or items of tangible personal property shall indicate on the form the name or names of every applicable public official, if any, for which disclosure is required by a prospective contractor.

**THIS FORM MUST BE INCLUDED IN THE REQUEST FOR PROPOSALS AND MUST BE FILED BY ANY PROSPECTIVE CONTRACTOR WHETHER OR NOT THEY, THEIR FAMILY MEMBER, OR THEIR REPRESENTATIVE HAS MADE ANY CONTRIBUTIONS SUBJECT TO DISCLOSURE.**

The following definitions apply:

“**Applicable public official**” means a person elected to an office or a person appointed to complete a term of an elected office, who has the authority to award or influence the award of the contract for which the prospective contractor is submitting a competitive sealed proposal or who has the authority to negotiate a sole source or small purchase contract that may be awarded without submission of a sealed competitive proposal.

“**Campaign Contribution**” means a gift, subscription, loan, advance or deposit of money

or other thing of value, including the estimated value of an in-kind contribution, that is made to or received by an applicable public official, or any person authorized to raise, collect or expend contributions on that official’s behalf for the purpose of electing the official to statewide or local office. “Campaign Contribution” includes the payment of a debt incurred in an election campaign, but does not include the value of services provided without compensation or unreimbursed travel or other personal expenses of individuals who volunteer a portion or all of their time on behalf of a candidate or political committee, nor does it include the administrative or solicitation expenses of a political committee that are paid by an organization that sponsors the committee.

“**Family member**” means a spouse, father, mother, child, father-in-law, mother-in-law, daughter-in-law or son-in-law of (a) a prospective contractor, if the prospective contractor is a natural person; or (b) an owner of a prospective contractor.

“**Pendency of the procurement proces**s” means the time period commencing with the public notice of the request for proposals and ending with the award of the contract or the cancellation of the request for proposals.

“**Prospective contractor**” means a person or business that is subject to the competitive sealed proposal process set forth in the Procurement Code [Sections [13-1-28](http://mobile.nmonesource.com/nxt/gateway.dll?f=jumplink$jumplink_x=Advanced$jumplink_vpc=first$jumplink_xsl=querylink.xsl$jumplink_sel=title;path;content-type;home-title;item-bookmark$jumplink_d=%7bnmsa1978%7d$jumplink_q=%5bfield%20folio-destination-name:'13-1-28'%5d$jumplink_md=target-id=0-0-0-5285) through [13-1-199](http://mobile.nmonesource.com/nxt/gateway.dll?f=jumplink$jumplink_x=Advanced$jumplink_vpc=first$jumplink_xsl=querylink.xsl$jumplink_sel=title;path;content-type;home-title;item-bookmark$jumplink_d=%7bnmsa1978%7d$jumplink_q=%5bfield%20folio-destination-name:'13-1-199'%5d$jumplink_md=target-id=0-0-0-5287) NMSA 1978] or is not required to submit a competitive sealed proposal because that person or business qualifies for a sole source or small purchase contract.

“**Representative of a prospective contractor**” means an officer or director of a corporation, a member or manager of a limited liability corporation, a partner of a partnership or a trustee of a trust of the prospective contractor.

**Name(s) of Applicable Public Official(s) if any:**

**(This field must be completed by the issuing State Agency. In most cases, the official identified will be the current Governor of New Mexico and Lieutenant Governor. If a local public body is using this template for their RFPs, it must complete this field with the applicable elected official(s).)**

DISCLOSURE OF CONTRIBUTIONS BY PROSPECTIVE CONTRACTOR:

Contribution Made By:

Relation to Prospective Contractor:

Date Contribution(s) Made:

Amount(s) of Contribution(s):

Nature of Contribution(s):

Purpose of Contribution(s):

(Attach extra pages if necessary)

Signature Date

Title (position)

**--OR—**

**NO CONTRIBUTIONS IN THE AGGREGATE TOTAL OVER TWO HUNDRED FIFTY DOLLARS ($250) WERE MADE** to an applicable public official by me, a family member or representative.

Signature Date

Title (Position)

**APPENDIX B**

**CERTIFICATION REGARDING LOBBYING**

Applicants must review the requirements for certification regarding lobbying included in the regulations cited below before completing this form. Applicants must sign this form to comply with the certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying." This certification is a material representation of fact upon which the Department of Education relies when it makes a grant or enters into a cooperative agreement. As required by Section 1352, Title 31 of the U.S. Code, and implemented at 34 CFR Part 82, for persons entering into a Federal contract, grant or cooperative agreement over $100,000, as defined at 34 CFR Part 82, Sections 82.105 and 82.110, the applicant certifies that: (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement; (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants and contracts under grants and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certification.

NAME OF APPLICANT PR/AWARD NUMBER AND / OR PROJECT NAME

PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

SIGNATURE DATE

ED 80-0013 06/04