**BIDDER QUESTIONNAIRE**

1. **Bidder Organization and Background**
2. Describe Organization, including size, areas of services, number of years in business, customer base, and any other pertinent information that would aid evaluators in formulating a determination about the capability, stability, and strength of the Bidder’s organization.

***Click here to enter text.***

1. What theories, experience or research on undoing racism do you draw from in your work? How do you define structural racism and what it means to be an anti-racist institution?

***Click here to enter text.***

1. **Bidder Qualifications and Experience**
2. Describe qualifications and experiences performing the services solicited in this RFP. Provide an explanation of the Bidder’s training and certification and how the company will maintain this training for all employees who will perform the services described in this RFP.

***Click here to enter text.***

1. Describe your facilitation and training approach, generally, and your approach for facilitation and training on diversity, equity, inclusion and race equity topics. Please describe your approach and process for delivering “train the trainer” training.

***Click here to enter text.***

1. How many facilitators do you anticipate working with to conduct this training and how do you plan to incorporate their services?

***Click here to enter text.***

1. Identify staff who will be assigned to the potential contract, indicating the responsibilities and qualifications of such personnel. Provide resumes for the named staff, which include information on the individual’s particular skills related to this project, education, experience, significant accomplishments and any other pertinent information. The Bidder must commit that staff identified in its Proposal will actually perform the assigned work. Any staff substitution must have the prior approval of AGO.

***Click here to enter text.***

1. Describe your experience training on racism in the legal system, such as to law firms, or to the public sector, such as to government agencies.

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1. Describe your experience training on use of racial equity toolkits.

***Click here to enter text.***

1. What is your familiarity with the Washington AGO and what information do you need from the AGO in order to develop the trainings and other services described in the RFP?

***Click here to enter text.***

1. **Quality Assurance**

Describe the Bidder’s process to assure Quality Assurance regarding the services it provides.

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1. **Approach/Strategy/Timeline**
2. Are you familiar with the practice of using caucusing in this type of work? Do you utilize this method yourself? If so, how would you incorporate caucusing into your work for the AGO?

***Click here to enter text.***

1. Please describe your implementation timeline that identifies 1) all tasks, activities, deliverables, and milestones that the applicant proposes to carry out to accomplish the services outlined in Attachment A – Statement of Work, to include group/classroom size minimums and maximums and a timetable for completion; 2) a description of how the applicant intends to utilize the virtual/online or in-person training environment to engage participants; and 3) the classroom structures and processes the applicant will utilize to create a learning environment that is safe for diverse, trauma-impacted, adult learners to achieve safety, predictability, and consistency. The applicant should state the number of days, following selection, by which it will be ready to initiate the work.

***Click here to enter text.***

1. **Related Information**
2. **State Contracts.** Has the Bidder or any subcontractor contracted with the state of Washington during the past 24 months?

[ ]  No [ ]  Yes

If Yes, indicate the name of the agency, the contract number and project description and/or other information available to identify the contract.

***Click here to enter text.***

1. Has the Bidder ever been terminated for default in the last five years?

[ ]  No [ ]  Yes

If Yes, describe such incident. Termination for default is defined as notice to stop performance due to the Bidder’s non-performance or poor performance and the issue of performance was either (a) not litigated due to inaction on the part of the Bidder, or (b) litigated and such litigation determined that the Bidder was in default. Submit full details of the terms for default including the other party's name, address, and phone number. Present the Bidder’s position on the matter. The AGO will evaluate the facts and may, at its sole discretion, reject the response on the grounds of the past experience. If no such termination for default has been experienced by the Bidder in the past five years, so indicate.

***Click here to enter text.***

1. **State Employees.** Is anyone in the Bidder’s staff or subcontractor’s staff a former employee of the state of Washington during the past 24 months, or is currently a Washington State employee?

[ ]  No [ ]  Yes

If Yes, identify the individual by name, the agency previously or currently employed by, job title or position held and separation date. Also identify any State employees or former State employees employed or on the Bidder’s governing board as of the date of the response. Include their position and responsibilities within the Bidder’s organization. Include any staff member(s) who will perform work on this contract and has retired from the State of Washington under the provisions of the 2008 Early Retirement Factors legislation. If following a review of this information, it is determined by the AGO that a conflict of interest exists, the Bidder may be disqualified from further consideration for the award of a contract.

***Click here to enter text.***

1. **Subcontractors. (MANDATORY)**
2. Does the Bidder anticipate subcontracting any of the work specified in this RFP?

[ ]  No [ ]  Yes

If Yes, identify any subcontractors who will perform services in fulfillment of contract requirements; the nature of services to be performed and include federal tax identification number (TIN) for each subcontractor. Add lines as needed.

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| --- | --- | --- |
| **Name/Address/Contact/Phone** | **TIN** | **Brief description of the nature of Service Provided** |
| **Click here to enter text.** | **Click here to enter text.** | **Click here to enter text.** |