

Request for Proposal

Applied Behavior Analysis Specialist

The purpose of the Request for Proposal (RFP) is to obtain competitive proposals for Applied Behavioral Analysis Services. The Board intends to appoint this individual to provide services a minimum of one day per week.

All professionals shall be currently licensed and authorized by the State of New Jersey to do business in the State of New Jersey.

District Background

The Newton Board of Education is comprised of Grades PS –12. Newton Public Schools currently serve approximately 1,600 students. The district has multiple special education programs and an extensive extra-curricular and interscholastic athletic program. The school has three separate buildings.

Selection Criteria

The Board of Education will evaluate proposals using the following criteria:

1. Experience with New Jersey public school districts; must have training/experience in Applied Behavior Analysis.
2. BCBA on staff
3. Recommendation from at least one public school
3. Fee proposal
4. Availability to provide up to 35 hours per month of ABA Program Supervision and consultation in three buildings. Services to include: parent consultation and training, supervision of staff completing RBT, home ABA services.

Proposal

Each professional is required to submit the following information in its proposal:

1. A list of all New Jersey public school clients and length of service to each.
2. A list of all New Jersey public school clients that have terminated services in the past two years.
3. Fee structure.
4. Copy of New Jersey Criminal History Approval
5. Taxpayer ID number
6. Copy of New Jersey Business Registration Form.

Information beyond the minimum requirements may also be submitted.

All proposals are to be submitted in writing and received no later than June 16, 2016

Proposals are to be submitted to:

Mrs. Jennifer Pasquali, Director of Special Services
Halsted Middle School
59 Halsted Street
Newton, New Jersey 07860

**STATE OF NEW JERSEY -- DIVISION OF PURCHASE AND PROPERTY
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

Quote Number: _____

Bidder/Offeror: _____

PART 1: CERTIFICATION

BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal non-responsive. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party

PLEASE CHECK THE APPROPRIATE BOX:

I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.

EACH BOX WILL PROMPT YOU TO PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, CLICK THE "ADD AN ADDITIONAL ACTIVITIES ENTRY" BUTTON.

Name _____	Relationship to Bidder/Offeror _____	<input type="button" value="Delete"/>
Description of Activities _____ _____		
Duration of Engagement _____	Anticipated Cessation Date _____	
Bidder/Offeror Contact Name _____	Contact Phone Number _____	

Certification: I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print): _____

Signature: _____

Do Not Enter PIN as a Signature

Title: _____

Date: _____