**Form Instructions:** This form must accompany all Requests for Proposals (RFPs) being presented to the Division of Procurement Services for approval.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **RFP Coordinator:** | Click or tap here to enter text. | | | **Office/Division/ Program:** | | Click or tap here to enter text. | |
| **Expected Contract Amount:** | $Click or tap here to enter text. | | | **Expected Initial Contract Length:** | | Click or tap here to enter text. | |
| **Funding Source:** | Click or tap here to enter text. | | | | | | |
| **Expected RFP Release Date:** | Click or tap to enter a date. | | | **Expected Contract Start Date:** | | Click or tap to enter a date. | |
| **Type of Services Sought:** | Click or tap here to enter text. | | | | | | |
| **Current Vendor:** | Click or tap here to enter text. | | | **Current Vendor a Maine Business:** | | Yes  No | |
| 1. **Specific Problem or Need**   Provide a detailed description of the goods, services or grants to be procured. | | | | | | | |
| Click or tap here to enter text. | | | | | | | |
| 1. **Prior Experience with Purchasing the Services Sought**    1. Is this a new service for the requesting Department?    2. If not a new service, have these goods, services or grants been previously solicited via RFP (if so, provide most recent RFP number)?    3. Was there an appeal request and/or hearing during the previous RFP? | | | | | | | |
| 2a. Yes  No | | | | | | | |
| 2b. Yes  No  If “Yes” - RFP#: Click or tap here to enter text. | | | | | | | |
| 2c. Yes  No | | | | | | | |
| 1. **Market Research**    1. Describe the market research efforts that have been completed to determine potential qualified vendors.    2. List the names of at least 3 businesses that are qualified and could potentially be interested in providing the services within this RFP. | | | | | | | |
| 3a.  Procurement IQ  GovWin IQ  Google Search and/or other internet search engines  Cold Calling Vendors  Cooperative Contracts  Contacting Other States  Request for Information (RFI)  Other: Click or tap here to enter text. | | | | | | | |
| 3b.   1. Click or tap here to enter text. 2. Click or tap here to enter text. 3. Click or tap here to enter text. 4. All Other: Click or tap here to enter text. | | | | | | | |
| 1. **Assistance from Outside Expertise with Requirements**    1. Did the requesting Department utilize a consultant/outside expert in the drafting of this RFP?    2. If yes, identify the consultant/outside expert. | | | | | | | |
| 4a. Yes  No | | | | | | | |
| 4b. Click or tap here to enter text. | | | | | | | |
| 1. **RFP Evaluation Team**   Identify the members of the evaluation team by name, title and role. Roles should include: lead, financial expert, business expert (preferably from outside the division or program area) and subject matter expert(s). | | | | | | | |
| **Name/Title** | | | **Role** | | | | |
| Click or tap here to enter text. | | | Financial Expert | | | | |
| Click or tap here to enter text. | | | Business Expert | | | | |
| Click or tap here to enter text. | | | Subject Matter Expert | | | | |
| Click or tap here to enter text. | | | Other (if applicable) | | | | |
| Click or tap here to enter text. | | | Other (if applicable) | | | | |
| Click or tap here to enter text. | | | Other (if applicable) | | | | |
| **Signatures** | | | | | | | |
| **Signature of requesting Department’s Commissioner (or designee):** | |  | | | | | |
| **Printed Name:** | | Click or tap here to enter text. | | | **Date:** | | Click or tap to enter a date. |
|  | |  | | | | | |
| **Signature of DAFS Procurement Official: \*** | |  | | | | | |
| **Printed Name:** | | Click or tap here to enter text. | | | **Date:** | | Click or tap to enter a date. |

*\*Signature of DAFS Procurement Official will be done after the GOVRFP form has been submitted to the Division of Procurement Services.*