



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

DIVISION OF PROCUREMENT SERVICES

STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		Department of Education, Adult Education	
Department Contract Administrator or Grant Coordinator:		Amy Poland	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 33,333.00	Advantage CT / RQS #:	CT 20221216*1696
CONTRACT	Proposed Start Date:	10/16/2022	Proposed End Date: 6/30/2023
AMENDMENT	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date: Click or tap to enter a date.
Vendor/Provider/Grantee Name, City, State:		Machias, Treasurer Of, Machias, ME	
Brief Description of Goods/Services/Grant:		Educational services that prepare adult students for post-secondary education and training, including academic and success supports and employability skills.	

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input checked="" type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

Maine adult education programs provide critical educational services for adult learners to prepare them for post-high school education and training. Programming in foundation academics, employability skills, and skills for success in college, career, and life, supports the college and career goals for adult students and assists them in their paths to a credential of value and high-quality employment. Most high-growth jobs in Maine require a credential beyond high school, and by 2020, 66% of jobs will require a credential (Educate Maine, Education Indicators for Maine Report, 2017). Increasing access and persistence to post-high school education and training is necessary for a strong Maine economy and workforce.

College transitioning programming, as part of a career pathways program, are part of the definition of adult education in Maine Statute. The Workforce Innovation and Opportunity Act (WIOA), under Title II-Adult Education and Literacy, includes in its purposes to “assist adults.... In the transition to postsecondary education and training, including through career pathways...”

This funding will allow the vendor to provide targeted service to enhance programming for student transitions to college and career.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

Funding was provided to Maine adult education programs to support academic and workforce programming. The vendor is a Maine adult education program that currently provides academic and workforce services to adult learners, including services that support the transition to an education and training program that results in a credential of value and/or high-quality employment.

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The state office of adult education distributed \$33,333.00 to each of its nine regional hubs.

4. Describe the plan for future competition for the goods or services.

This funding is a one-time allocation.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)



Does this request utilize ARPA/MJRP funds?

☐ Yes – If Yes, please attach the approved Business Case(s).

☒ No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Daniel A. Chuhta	Date:	12/27/2022
Signature of DAFS Procurement Official:	 <small>DocuSigned by: FA813178102243C</small>		
Typed Name:	Joseph Zrioka	Date:	1/17/2023

Certificate Of Completion

Envelope Id: 3480997FD08C41CE8CB8B5702D7F589A		Status: Completed
Subject: Please DocuSign This Document		
Source Envelope:		
Document Pages: 17	Signatures: 2	Envelope Originator:
Certificate Pages: 1	Initials: 0	Daniel A. Chuhta
AutoNav: Enabled		Daniel.Chuhta@maine.gov
Envelopeld Stamping: Disabled		IP Address: 162.248.186.11
Time Zone: (UTC-05:00) Eastern Time (US & Canada)		

Record Tracking

Status: Original	Holder: Daniel A. Chuhta	Location: DocuSign
12/27/2022 11:39:00 AM	Daniel.Chuhta@maine.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

Signer Events

Signature	Timestamp
Daniel A. Chuhta	Sent: 12/27/2022 11:39:01 AM
Daniel.Chuhta@maine.gov	Viewed: 12/27/2022 11:39:48 AM
Deputy Commissioner	Signed: 12/27/2022 11:40:57 AM
Maine Department of Education	Freeform Signing
Security Level: Email, Account Authentication (None)	
Signature Adoption: Uploaded Signature Image	
Using IP Address: 72.231.250.95	

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	12/27/2022 11:39:01 AM
Certified Delivered	Security Checked	12/27/2022 11:39:48 AM
Signing Complete	Security Checked	12/27/2022 11:40:57 AM
Completed	Security Checked	12/27/2022 11:40:57 AM
Payment Events	Status	Timestamps