



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		Labor, Bureau of Employment Services		
Department Contract Administrator or Grant Coordinator:		Joan M. Dolan		
(If applicable) Department Reference #:				
Agency Department Code:	12A	Advantage CT / RQS #:	CT 20251230*1475	
Amount: (Contract/Amendment/Grant)		\$440,465.04		
CONTRACT	Proposed/Original Start Date:	10/1/2025	Proposed/Most Recent End Date:	6/30/2028
AMENDMENT	New Effective Date:		New End Date (if Applicable):	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Maine Community College System/Maine Quality Centers Augusta, Maine		
Brief Description of Goods/Services/Grant:		The provider will employ Apprenticeship Navigators at York and Washington County Community Colleges to expand Registered Apprenticeship Programs as a career pathway for Maine's workforce and employers; develop pre-apprenticeship MOAs with secondary institutions; and leverage philanthropic dollars to help offset the cost of related technical instruction for apprentices.		

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 checked="" type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed

<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. Higher Education 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.	<p>The primary purpose of this Contract is to expand and connect registered apprenticeship opportunities for high school and adult learners to Maine Community College System programming and registered apprenticeship programs to fulfill Maine business needs for a trained and highly skilled workforce. By formalizing the integration of apprenticeship programming within the Maine Community College System and Maine High Schools, apprenticeship will become a viable career pathway option for Maine residents and a robust skilled workforce resource for employers. The provider will employ Apprenticeship Navigators at York and Washington County Community Colleges to expand RAs as a career pathway for Maine's workforce and employers; develop pre-apprenticeship MOAs with secondary institutions; register Maine businesses as sponsors or sub-sponsors, and leverage philanthropic dollars to help offset the cost of related technical instruction for apprentices.</p>
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	<p>The Maine Community College System is the recognized provider of affordable and diverse post-secondary education in the State of Maine and is a long-standing and key partner of the Maine Apprenticeship Program. MCCS is connected to and integrated within many high school programs already, providing high school students dual enrollment opportunities allowing them to earn college credit for courses taken at little to no cost while in high school. MCCS is the only entity in Maine who has the apprenticeship experience and the key connections needed to carry out the mission of the grant funds allocated for this purpose and the reason they were named in the federal grant proposal as the host agency.</p>
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	<p>The proposed salary and benefits costs averaging \$69,473 annually are well within the salary without benefits range for Education Administrators in Maine of \$58,400 to \$119,040 as reported in O*Net Online Local Wages: 11-9039.00 - Education Administrators, All Other</p>
4. Describe the plan for future competition for the goods or services.	<p>There are no plans for future competition for the services as this a federally funded, limited time period grant project.</p>

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

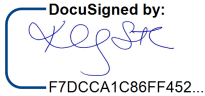
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

The requesting department’s signatory affirms, understands, and acknowledges Maine’s Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

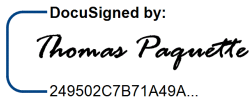
1. The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Kimberly A. Smith	Date:	1/7/2026

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department’s Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:			
Typed Name:	Thomas Paquette	Date:	1/22/2026