



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
Table with 4 columns: Department Office/Division/Program, Department Contract Administrator or Grant Coordinator, (If applicable) Department Reference #, Amount, Advantage CT / RQS #, CONTRACT/AMENDMENT/GRANT type, and dates.

PART II: JUSTIFICATION FOR VENDOR SELECTION
Check the box below for the justification(s) that applies to this request. (Check all that apply.)
Table with 4 columns: Justification type (A-L) and checkbox.

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.

Pursuant to [2001, c. 454, §11](#) (AMD), children who reside with a parent in the unorganized territory or who are resident emancipated minors or residents at least 18 years old are eligible to attend elementary and secondary schools and to receive appropriate special education and related services without charge to themselves or their parents. Education must be provided in alignment with the system of learning results as established in [20-A MRSA §6209](#) under the direction of the commissioner and must meet the general standards for elementary and secondary schooling and special education established.

The EUT does not have certified licensed counselors on staff to provide the required services. The need for the services is primarily located within EUT operated schools in Aroostook, Penobscot & Washington Counties, but there may be intermittent needs in other areas of the EUT.

This amendment extends the contract for an additional academic year.

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

Christine Manley d/b/a BALANCE is fully licensed and able to provide the necessary services as needed and upon request due to her close proximity to all 3 EUT schools.

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

The EUT and the State of Maine does not provide staff in the school to provide the necessary consultation, evaluation, or therapy services as required per each student's IEP.

The fees charged by Balance-C Manley are consistent with other providers who were willing in the past to provide these services. The cost of travel for Christine Manley is less costly because of her geographic location to the schools that are being served.

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

Previous multiple RFP review processes resulted in no competitive multiple responses. Therefore, it was determined that due to the nature of the rural areas requiring services and the previous receipt of single vendor response bids for these services, a competitive process would not be required.

The UT continually inquires, coordinates and collaborates with local area school districts in order to gain information in order to acquire additional providers who are qualified and/or already providing services in other nearby local school districts.

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) – 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 signatory understands and acknowledges Maine’s Conflict of Interest statutes.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Daniel A Chuhta	Date:	8/16/2024
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	3/24/2025

Certificate Of Completion

Envelope Id: 8EA6B423960D4A2CB3DC2E6760646518	Status: Completed
Subject: Please Docusign This Document	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Disabled	Daniel A. Chuhta
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	Daniel.Chuhta@maine.gov
	IP Address: 64.207.219.135

Record Tracking

Status: Original	Holder: Daniel A. Chuhta	Location: DocuSign
8/16/2024 10:59:53 AM	Daniel.Chuhta@maine.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

Signer Events

Daniel A. Chuhta
 Daniel.Chuhta@maine.gov
 Deputy Commissioner
 Maine Department of Education
 Security Level: Email, Account Authentication (None)

Signature



Signature Adoption: Drawn on Device
 Using IP Address: 72.231.250.95

Timestamp

Sent: 8/16/2024 10:59:53 AM
 Viewed: 8/16/2024 11:00:05 AM
 Signed: 8/16/2024 11:00:55 AM
 Freeform Signing

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	8/16/2024 10:59:54 AM
Certified Delivered	Security Checked	8/16/2024 11:00:05 AM
Signing Complete	Security Checked	8/16/2024 11:00:55 AM
Completed	Security Checked	8/16/2024 11:00:55 AM

Payment Events

Status

Timestamps