



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:		Education	
Department Contract Administrator or Grant Coordinator:		Amy Poland	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 14,300.00	Advantage CT / RQS #:	RQS 20220504*1288
CONTRACT	Proposed Start Date:	6/28/2022	Proposed End Date: 6/27/2023
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:
Vendor/Provider/Grantee Name, City, State:		PowerSchool Group LLC, Folsom, CA	
Brief Description of Goods/Services/Grant:		Access to and implementation of the Unified Talent Professional Learning web-based platform and integration with Schoology LMS.	

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 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. 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.

The Workforce Innovation and Opportunity Act of 2014 (WIOA) requires states to operate a high-quality professional development system that supports local adult education providers with technical assistance and professional learning that improves instruction (Sec. 223a.1.B). To effectively implement the system, the state office of adult education needs a system to share professional learning opportunities with the field, collect registrations, track participation and completion data, generate transcripts for certification purposes, distribute evaluations, etc. This needs to be front-facing and web-based for over 1,000 adult education staff members across the state.

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

The state office of adult education uses the Schoology learning management system as the main online learning platform for its professional development. The vendor, PowerSchool Group LLC, also owns Schoology. Their Professional Learning product integrates seamlessly with the Schoology platform, reducing the time needed for implementation and increasing the efficiency for the state office staff and adult education users in accessing courses and materials in Schoology.

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

PowerSchool's Professional Learning pricing structure is based on user licenses (1,016 for \$5,000) which is similar to its pricing for Schoology learning management system. This price is less than other learning management systems, such as D2L. The implementation and training costs are a one-time fee (\$9,300) and are in alignment with the implementation and training costs for other online learning platforms used by the state office, such as Voxy EnGen.

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

The Professional learning user licenses are easy to renew on a yearly basis. We will monitor the use of the platform and gather regular feedback from users to drive future decisions.

### 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):	<i>Tamara Ranger</i>		
Typed Name:	Tamara Ranger	Date:	6/9/2022
Signature of DAFS Procurement Official:	<i>Joseph Zrioka</i> <small>EA013178102243C...</small>		
Typed Name:	Joseph Zrioka	Date:	6/22/2022

**Certificate Of Completion**

Envelope Id: 7A9114738DA44A7285D5CF746A298A87	Status: Completed
Subject: Please DocuSign This Document	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 2	Initials: 0
AutoNav: Enabled	Envelope Originator: Tamara Ranger Tamara.Ranger@maine.gov
Envelopeld Stamping: Disabled	IP Address: 64.207.219.137
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	

**Record Tracking**

Status: Original 6/9/2022 10:09:49 AM	Holder: Tamara Ranger Tamara.Ranger@maine.gov	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

**Signer Events**

Signer Events	Signature	Timestamp
Tamara Ranger Tamara.Ranger@maine.gov Carahsoft OBO Maine Department of Education Security Level: Email, Account Authentication (None)	<i>Tamara Ranger</i>  Signature Adoption: Pre-selected Style Signed by link sent to Tamara.Ranger@maine.gov Using IP Address: 67.242.184.4	Sent: 6/9/2022 10:09:50 AM Viewed: 6/9/2022 10:10:02 AM Signed: 6/9/2022 10:11:42 AM Freeform Signing

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**In Person Signer Events**

In Person Signer Events	Signature	Timestamp
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**Editor Delivery Events**

Editor Delivery Events	Status	Timestamp
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**Agent Delivery Events**

Agent Delivery Events	Status	Timestamp
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**Intermediary Delivery Events**

Intermediary Delivery Events	Status	Timestamp
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**Certified Delivery Events**

Certified Delivery Events	Status	Timestamp
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**Carbon Copy Events**

Carbon Copy Events	Status	Timestamp
Lisa Perry Lisa.Perry@maine.gov Carahsoft OBO Maine Department of Education Security Level: Email, Account Authentication (None)	COPIED	Sent: 6/9/2022 10:11:43 AM

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**Witness Events**

Witness Events	Signature	Timestamp
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**Notary Events**

Notary Events	Signature	Timestamp
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**Envelope Summary Events**

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/9/2022 10:09:50 AM
Certified Delivered	Security Checked	6/9/2022 10:10:02 AM
Signing Complete	Security Checked	6/9/2022 10:11:42 AM
Completed	Security Checked	6/9/2022 10:11:43 AM

**Payment Events**

**Status**

**Timestamps**