

# State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		DHHS/OCFS		
Department Contract Administrator or Grant Coordinator:		Lora Blackwell / Chris Moiles		
(If applicable) Department Reference #:		CBH-21-6101		
Amount: (Contract/Amendment/Grant)		\$ 200,000.00	Advantage CT / RQS #:	CT 10A 20200702000000000012
CONTRACT	Proposed Start Date:	7/1/2020	Proposed End Date:	6/30/2021
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:		Maine Association for the Education of Young Children 295 Water Street, Suite 10 Augusta, ME 04330		
Brief Description of Goods/Services/Grant:		Administration of T.E.A.C.H. Scholarships		

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

PART III: SUPPLEMENTAL INFORMATION
Please respond to ALL of the following:
<b>1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.</b>

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### PART III: SUPPLEMENTAL INFORMATION

The purpose of this Agreement is to support workforce development in the area of early child care. This agreement provides funding to the T.E.A.C.H. Early Childhood® Scholarship Program, to increase education and compensation, and promote commitment to the early childhood workforce. T.E.A.C.H. provides a variety of scholarships that create access to higher education for early educators. T.E.A.C.H. scholarships provide support, time, and funding to ensure credentials and degrees are obtained without incurring college debt.

**2. Provide a brief justification for the selected vendor to supplement the response in Part II.**

The Maine AEYC (Association for the Education of Young Children) is the only organization in the State licensed by the T.E.A.C.H. Early Childhood® National Center to administer the T.E.A.C.H. Early Childhood® Scholarship Program. The T.E.A.C.H. Early Childhood® National Center allows only one organization per state to be licensed.

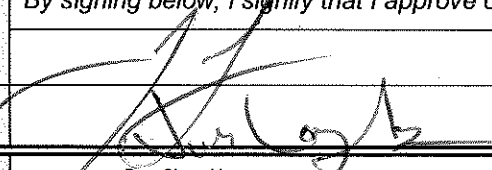
**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

Maine AEYC, as the licensed entity, is responsible for finding and securing funds to operate the T.E.A.C.H. program in Maine. They have solicited all other funds for the program from private donors and organizations. The Department is contributing \$200,000 as a portion of the total funds they need to operate and retain the national license. The amount allocated was based on an assessment of available funding and is equal to or less than what many other states are contributing from their CCDBG to their state T.E.A.C.H. program.

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

Future agreements to provide funding to the T.E.A.C.H. Early Childhood® Scholarship Program will not be RFP'd. Instead, agreements will be made with the nationally-designated, Maine organization that is licensed by the T.E.A.C.H. Early Childhood® National Center.

### PART IV: APPROVALS

<b>Signature of requesting Department's Commissioner (or designee):</b>	<i>By signing below, I signify that I approve of this procurement request.</i>		
<b>Printed Name:</b>		<b>Date:</b>	14-Jul-20
<b>Signature of DARS Procurement Official:</b>	DocuSigned by: <i>Kathy Paquette</i>		
<b>Printed Name:</b>	41C2BA36EAF44CD Kathy Paquette	<b>Date:</b>	7/23/2020