

**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.

**PART I: OVERVIEW**

Department Office/Division/Program:		Education – Office of Special Services and Inclusive Education	
Department Contract Administrator or Grant Coordinator:		Stacey Bean	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 18,500.00	Advantage CT / RQS #:	20240709*0041
CONTRACT	Proposed Start Date:	<b>8/1/2024</b>	Proposed End Date: 7/31/2025
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:		Kris Grant 41 Thompson Street South Portland, Maine 04106	
Brief Description of Goods/Services/Grant:		Continue work as a PBIS coach to build capacity and sustainability for Maine regions. External coaching support is aligned with our Tier 1 Training Cohort Model and supports district/school teams with implementation.	

**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.

PBIS (Positive Behavior Interventions & Supports) is expanding across the state of Maine. To build capacity and sustainability for Maine regions, last fall the Maine PBIS team through the University of Maine developed a train the trainer/coach micro-credential. The educators and administrators who applied for this opportunity went through a selection process and completed their training. They are now prepared to coach and train in Maine.

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

Maine PBIS in collaboration with the University of Maine developed a university sanctioned PBIS training & coaching micro-credential with associated graduate level coursework. This vendor successfully completed the micro-credential and coursework requirements and was also recommended by the faculty coordinating the trainer/coach courses. She has worked on the first training year of this program and has now agreed to do the second training year.

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

For each school that the coach works with, they will spend approximately a minimum of 30 hours a year. The coaches will also travel to the schools. This is a rate of \$125 and hour which is appropriate for consulting and coaching work of this type and would also include their travel expenses and any materials/supplies needed.

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

The PBIS coach contracts will be for one year – we need to have some flexibility for next year.

**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:	7/15/2024
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	9/4/2024

**Certificate Of Completion**

Envelope Id: 3C577CB0C260412C870B4209206FB821	Status: Completed
Subject: Please Docusign This Document	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator: Daniel A. Chuhta Daniel.Chuhta@maine.gov
Envelopeld Stamping: Disabled	IP Address: 64.207.219.136
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	

**Record Tracking**

Status: Original 7/15/2024 1:37:39 PM	Holder: Daniel A. Chuhta Daniel.Chuhta@maine.gov	Location: DocuSign
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: 7/15/2024 1:37:39 PM  
Viewed: 7/15/2024 1:37:49 PM  
Signed: 7/15/2024 1:38:46 PM  
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	7/15/2024 1:37:39 PM
Certified Delivered	Security Checked	7/15/2024 1:37:49 PM
Signing Complete	Security Checked	7/15/2024 1:38:46 PM
Completed	Security Checked	7/15/2024 1:38:46 PM

**Payment Events**

**Status**

**Timestamps**