



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:	DHHS/OCFS		
Department Contract Administrator or Grant Coordinator:	Jennifer Levesque/Nicole Mitchell		
(If applicable) Department Reference #:	ECE-26-6101A		
Agency Department Code:	10A	Advantage CT / RQS # :	20250502000ECE266101
Amount: (Contract/Amendment/Grant)	Amend A: \$150,000.00 Revised: \$508,000.00		
CONTRACT	Proposed/Original Start Date:	7/1/2025	Proposed/Most Recent End Date: 6/30/2026
AMENDMENT	New Effective Date:	7/1/2025	New End Date (if Applicable): NA
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 Augusta, ME		
Brief Description of Goods/Services/Grant:	Administration of TEACH Scholarships		

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 checked="" 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.

The purpose of this Amendment is to add funding to support an increase in TEACH scholarships awarded and related costs.

The purpose of this Agreement is to support workforce development in early child care. This Agreement provides funding to the TEACH (Teacher Education and Compensation Helps) Early Childhood® Scholarship Program, to increase education and compensation, and promote commitment to the early childhood workforce. TEACH provides a variety of scholarships that create access to higher education for early educators. TEACH 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. Reference the solicitation (RFP/RFA/RFQ) number and the date of award notification, if applicable.

The Maine AEYC (Association for the Education of Young Children) is the only organization in the State of Maine that is licensed by the TEACH Early Childhood® National Center to administer the TEACH Early Childhood® Scholarship Program. The TEACH Early Childhood® National Center allows only one (1) 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.

The Maine AEYC, as the only licensed entity in the State, is responsible for finding and securing funds to operate the TEACH program in Maine. They have solicited all other funds for the program from private donors and organizations. The Department is contributing \$508,000 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 (Child Care Development Block Grant) to their state's TEACH program. OCFS plans to re-align the TEACH program funding with this SFY26 renewal by supporting an increased number of scholarships and a re-alignment in administrative funds to maximize the scholarships to the Early Care and Education (ECE) workforce. An additional \$28,000 in Preschool Development Grant funds is being added to the Agreement to support a statewide conference that is organized and hosted by the Maine AEYC, for professionals in the ECE field. The funds will pay the discounted registration fees for Career and Technical Education instructors and their students, and Leading Early Learners participants to attend the conference. This support of the next generation of early educators is critical to strengthening the ECE workforce.

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

The Department does not intend to competitively procure this service.

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.

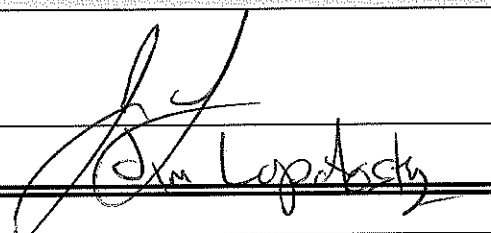
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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 signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):		
Typed Name:	Dan Lopatich	Date: 4-Sep-25

PART VII: EMERGENCY – Required only if selecting E. Emergency Justification

The signature below indicates approval by the Commissioner or designee of this procurement request.

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

Signature of DAFS Procurement Official:	DocuSigned by:  41C2BA36FAE44CD	
Typed Name:	Kathy Paquette	Date: 9/12/2025