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:			DOL, Bureau or Rehab Services				
Department Contract Administrator or Grant Coordinator:			Terry Morrell				
(If applicable) Department Reference #:			N/A				
(Contract/Amend	Amount: \$ 50,00 act/Amendment/Grant)		Advanta		age CT / RQS #:	202	31002*0957
CONTRACT	Proposed St	art Date:	10/1/202	3	Proposed End Date:		9/30/2024
AMENDMENT	Original Start Date:				Effective Date:		
AMENDINEN	Previous End Date:				New End Date:		
GRANT	Project Start Date:				Grant Start Date:		
	Project E	nd Date:			Grant End D)ate:	·
Vendor/Provider/Grantee Name, City, State:			360 Degree Academy Inc. 1006 Cook Dr SE, Washington, DC 20032				
Brief Description of Goods/Services/Grant:		The 360 Degree Academy's curriculum is the only one designed and accessible for deaf, hard of hearing, and deafblind high school students. This specialized and comprehensive curriculum addresses a significant gap in transition services for this population, thereby providing a compelling rationale for a sole source justification. Our unique combination of accessible instructional technology, direct instruction in sign language, and emphasis on self-advocacy distinguishes us from other educational providers. The depth and breadth of our curriculum that encompasses in depth all the five areas mandated by the WIOA, combined with the extensive involvement of the Deaf community in its development and review, further underscores our unique position to serve this population.					

REV 4/4/2023

PART II: JUSTIFICATION FOR VENDOR SELECTION							
Check the box below for the justification(s) that applies to this request. (Check all that apply.)							
	A. Competitive Process		G. Grant				
	B. Amendment		H. State Statute/Agency Directed				
\boxtimes	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				

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.

360 Degree Academy offers an innovative, comprehensive online Pre-Employment Transition Services (Pre-ETS) curriculum. This includes 17+ hours of video-based content supported by instructional aids, offering flexibility for various deployment options. The curriculum is delivered in American Sign Language (ASL) with professional voiceover, accurate captioning, transcripts, and a sensory-friendly appearance, making it a truly accessible solution.

These services are needed to supplement the Pre-ETS services by our staff to help DVR meet the federally mandated requirement of 15% of our grant. These services would also help to provide more resources.

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

At this time 360-degree academy is the only known resource to provide these services for Deaf and Hard of Hearing.

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

The prices below were discussed:

Pricing

- Per Client Authorization Flipped Instruction: \$1,950/client
- Live Instruction of Curriculum (Hybrid): \$2,750/client
 - a) Pre-ETS for 14-21 y/o (5 days) + online access until student high school graduation
 - b) Work Readiness for 18+ y/o (3-5 days) + online access for 1 year after the program

As we engage in this partnership, we would be glad to explore alternative deployment options and potentially combine different strategies to best serve the diverse needs of your population.

PA	RT III: SUPPLEMENTAL INFORMATION
:	
Describe the plan for fur	ture competition for the goods or services.
PART IV: AMERICAN RESC	UE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)
Does this request utilize ARPA	
•	
☐ Yes – If yes, please attach t	he 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	0 10000
Department's Commissioner (Or designee):	JOH .
Typed Name:	V L & Date: L-L-
	Limberty Smit Date. 10/23/2023
Signature of DAFS Procurement Official:	DocuSigned by: Kathy, Paquette
Frocurement Official.	41c2BA36FAF44CD

Kathy Paquette

Typed Name:

11/2/2023

Date: