



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**OFFICE OF STATE 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 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:		Education – Education In The Unorganized Territories	
Department Contract Administrator or Grant Coordinator:		Cathy Severance	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 10,000.00	Advantage CT / RQS #:	05C20241001*891
<b>CONTRACT</b>	Proposed Start Date:	<b>8/15/2024</b>	Proposed End Date: 8/14/2025
<b>AMENDMENT</b>	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Nicole J Charette Caribou, ME	
Brief Description of Goods/Services/Grant:		EUT Connor CS Nurse AY24-25	

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.

<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
<p>Pursuant to <a href="#">2001, c. 454, §11</a> (AMD), children who reside with a parent in the unorganized territory or who are resident emancipated minors or residents at least 18 years old are eligible to attend elementary and secondary schools and to receive appropriate special education and related services without charge to themselves or their parents. Education must be provided in alignment with the system of learning results as established in <a href="#">20-A MRSA §6209</a> under the direction of the commissioner and must meet the general standards for elementary and secondary schooling and special education established.</p> <p>The Education In The Unorganized Territories (EUT) does not have licensed Registered Nursing staff to provide the required services. The need for the services is primarily located within EUT operated Connor CS in Aroostook County, but there may be intermittent needs in other areas of the EUT.</p>	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
<p>Nicole J Charette is a fully licensed RN in Aroostook County and able to provide the necessary services as needed and upon request. In addition, the fee of \$30 per hour as charged by the provider is consistent with other service providers who were willing in the past to provide these services. The cost of travel is less because of the resident location of the provider in Caribou.</p> <p>To be qualified a vendor must have:</p> <ul style="list-style-type: none"> <li>• An active and valid Registered Nurse license for these services issued by the State of Maine</li> <li>• Have an active criminal history record check (CHRC) through the Maine Department of Education</li> <li>• Liability &amp; Data Breach Insurance or an alternative that is preapproved by the State of Maine.</li> </ul> <p>Any qualified provider who is interested in a contract should contact the listed contract administrator.</p>	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
<p>The EUT and the State of Maine does not provide staff in the school to provide the necessary consultation, evaluation, or therapy services as required for operations of EUT schools.</p>	
4. Describe the plan for future competition for the goods or services.	
<p>The EUT continually communicates with surrounding schools to identify School Services trained RN's for its schools.</p>	

**PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)**

Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/>	Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).
<input type="checkbox"/>	Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.
<input checked="" type="checkbox"/>	No – If No, proceed to Part V.


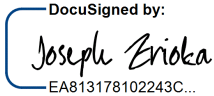
**PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE**

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:	10/21/2024
Signature of DAFS Procurement Official:			
Typed Name:	Joseph Zrioka, IT Procurement Director	Date:	10/18/2024

**Certificate Of Completion**

Envelope Id: A3375A016328426EAE747D2772A1BB1F	Status: Completed
Subject: Complete with DocuSign: ITP-243933 PJF Charette.docx	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Joseph Zrioka
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	joseph.a.zrioka@maine.gov
	IP Address: 64.135.140.219

**Record Tracking**

Status: Original	Holder: Joseph Zrioka	Location: DocuSign
10/18/2024 6:22:31 PM	joseph.a.zrioka@maine.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: State of Maine - Office of Information Technology	Location: DocuSign

**Signer Events**

Joseph Zrioka  
joseph.a.zrioka@maine.gov  
Director of IT Procurement  
State of Maine - Office of Information Technology  
Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
EA813178102243C...  
Signature Adoption: Pre-selected Style  
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Sent: 10/18/2024 6:27:20 PM  
Viewed: 10/18/2024 6:27:34 PM  
Signed: 10/18/2024 6:27:56 PM

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**Signature**

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**Timestamp**

**Intermediary Delivery Events**

**Status**

**Timestamp**

**Certified Delivery Events**

**Status**

**Timestamp**

**Carbon Copy Events**

**Status**

**Timestamp**

Jennifer Tarr  
Jennifer.L.Tarr@maine.gov  
DOE Procurement Director  
Carahsoft OBO Maine Department of Education  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Accepted: 5/20/2021 2:29:25 PM  
ID: 71ebd786-a01b-4229-bdd0-877f12eec3e3

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Sent: 10/18/2024 6:27:57 PM

Katherine Warren  
Katherine.Warren@maine.gov  
Education Data Manager- MDOE  
Maine Department of Education  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**

COPIED

Sent: 10/18/2024 6:27:58 PM

Carbon Copy Events	Status	Timestamp
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Accepted: 12/9/2022 3:33:50 PM  
ID: 775ae2e1-0e6f-45c8-9a71-80af987f1644

Olivia Schafer  
Olivia.Schafer@maine.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

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

IT Procurement Team email  
ITProcurement@maine.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

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Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	10/18/2024 6:27:21 PM
Certified Delivered	Security Checked	10/18/2024 6:27:34 PM
Signing Complete	Security Checked	10/18/2024 6:27:56 PM
Completed	Security Checked	10/18/2024 6:28:00 PM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure
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## **ELECTRONIC RECORD AND SIGNATURE DISCLOSURE**

From time to time, Carahsoft OBO Maine Office of Information Technology (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

### **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

**How to contact Carahsoft OBO Maine Office of Information Technology:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [kendra.l.coates@maine.gov](mailto:kendra.l.coates@maine.gov)

**To advise Carahsoft OBO Maine Office of Information Technology of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [kendra.l.coates@maine.gov](mailto:kendra.l.coates@maine.gov) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

**To request paper copies from Carahsoft OBO Maine Office of Information Technology**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to [kendra.l.coates@maine.gov](mailto:kendra.l.coates@maine.gov) and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to [kendra.l.coates@maine.gov](mailto:kendra.l.coates@maine.gov) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

### **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

### **Acknowledging your access and consent to receive and sign documents electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Carahsoft OBO Maine Office of Information Technology as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Carahsoft OBO Maine Office of Information Technology during the course of your relationship with Carahsoft OBO Maine Office of Information Technology.