

**Sacramento Employment and Training Agency**

925 Del Paso Boulevard, Suite 100  
Sacramento, CA 95815

[www.seta.net](http://www.seta.net)

***REQUEST FOR PROPOSALS***

for the

Program Year: 2026-2027

**COMMUNITY SERVICES BLOCK GRANT  
PROGRAM**

**Release Date**

Friday – August 8, 2025  
2:00 p.m.

**Offeror's Conference**

Thursday – August 14, 2025  
10:00 a.m.

**Pre-Qualification Deadline**

Wednesday, August 20, 2025  
4:30 p.m.

**Submittal Deadline**

Friday, September 5, 2025  
4:00 p.m.

## **TABLE OF CONTENTS**

FUNDING CALENDAR .....	4
------------------------	---

### **SECTION I: GENERAL INFORMATION AND GUIDELINES**

BACKGROUND .....	4
FEATURES OF THIS SOLICITATION.....	5
PURPOSE OF THIS SOLICITATION .....	6
QUALIFIED APPLICANT AGENCIES .....	6
AVAILABLE FUNDS .....	6
COMMUNITY ACTION BOARD AND LOCAL PLAN PRIORITY AREAS .....	7
ALLOWABLE SERVICES AND ACTIVITIES .....	7
PREQUALIFICATION REQUIREMENTS SUBMITTAL DEADLINE .....	12
RFP OFFEROR'S CONFERENCE.....	13
RFP UPDATES.....	13
PROPOSAL DEADLINE AND SUBMITTAL PROCEDURE .....	14
TERM OF AGREEMENT.....	15
EXTENSION OF AGREEMENTS.....	15
SELECTION PROCEDURES .....	15
PROTEST PROCEDURES TO RESOLVE PROCUREMENT DISPUTES .....	15
FORMAL AGREEMENT .....	16
PROPOSAL EVALUATION CRITERIA .....	16
LIMITATION .....	17
MODIFICATION OF AGREEMENTS .....	17
TARGETED GROUPS AND NEIGHBORHOODS .....	17
CSBG INCOME ELIGIBILITY REQUIREMENTS .....	18

CSBG RESIDENCY REQUIREMENTS .....	19
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## **SECTION II: INSTRUCTIONS FOR COMPLETING THE PROPOSAL**

INSTRUCTIONS FOR COMPLETING THE PROPOSAL .....	19
PROPOSAL FORMAT.....	19
PROPOSAL COMPONENTS ASSEMBLY ORDER .....	20
PROPOSAL SUMMARY .....	20
PROPOSAL RESPONSES .....	20
PROPOSAL FORMS .....	22
PROPOSAL EXHIBITS .....	23

## **SECTION III: PROPOSING ORGANIZATION FORMS LIBRARY AND DEFINITIONS**

FORM 1	COVER SHEET .....	25
FORM 2	BUDGET AND COST ALLOCATION PLAN FORM .....	27
FORM 3	ANNUAL SERVICE PROJECTIONS FORM .....	32
FORM 4	PROGRAM INTERNAL EVALUATION AND STANDARDS FORM .....	35
FORM 5	COLLABORATIVE PARTNERS FORM .....	36
FORM 6	REFERENCES FORM .....	37
FORM 7	CHECKLIST (OPTIONAL).....	38
	PROGRAM DEFINITIONS .....	39

## **SECTION IV APPLICANT PREQUALIFICATION AND INSURANCE REQUIREMENTS**

APPLICANT AGENCY PREQUALIFICATION REQUIREMENTS .....	40
INSURANCE REQUIREMENTS .....	71

**SACRAMENTO EMPLOYMENT AND TRAINING AGENCY**  
**COMMUNITY SERVICES BLOCK GRANT**  
**FUNDING CALENDAR**

**Program Year 2026/2027**

<b><u>DATE</u></b>	<b><u>EVENT</u></b>
Friday, August 8, 2025 1:00 p.m.	Request for Proposals Release Date
Thursday, August 14, 2025 10:00 a.m.	Offeror's Conference
Wednesday, August 20, 2025 4:30 p.m.	Pre-qualification Requirements Submission Deadline
<b>Friday, September 5, 2025 4:00 p.m. Deadline</b>	<b><u>PROPOSALS DUE BY 4:00 p.m.</u></b>
Friday, October 31, 2025 3:30 p.m.	Staff Recommendations Released
Wednesday, November 12, 2025 10:00 a.m.	Community Action Board (CAB) Meeting for the Development and Approval of PY 2026/2027 CSBG Funding Recommendations.
Wednesday, November 26, 2025 4:30 p.m.	Written Protest Submission Deadline
Thursday, December 4, 2025 10:00 a.m.	SETA Governing Board Meeting Final Funding Decisions Made on Community Services Block Grant Applications
Friday, December 5, 2025	Letters to Proposers with Funding Allocations
January 1, 2026	PY 2026/2027 CSBG Program Start Date

**PLEASE NOTE THAT ALL DATES AND TIMES ARE SUBJECT TO CHANGE.**  
**MEETINGS WILL EITHER TAKE PLACE IN THE SETA BOARD ROOM, 925 DEL PASO**  
**BOULEVARD, SUITE 100, SACRAMENTO, CA 95815, OR VIA ZOOM**

# **SECTION I: GENERAL INFORMATION AND GUIDELINES**

## **BACKGROUND**

This Request for Proposals (RFP) was developed in response to key findings and recommendations identified in the 2026-2027 Community Action Plan under the Community Services Block Grant Act.

The Sacramento Employment and Training Agency (SETA) is a Joint Powers Authority of the City and County of Sacramento that administers state and federally-funded human services programs throughout Sacramento County. Programs for economically disadvantaged persons include job training and employment assistance under the federal Workforce Innovation and Opportunity Act (WIOA), services to refugees under the Refugee Social Services Grant, human services under the Community Services Block Grant, and educational programs under Head Start.

Under the federal policy on block grants, the State Department of Community Services and Development (CSD) is the recipient of the Community Services Block Grant (CSBG) for the allocation of funds, on a formula basis, to designated Community Action Agencies throughout California.

Respondents should be aware that SETA's activities, as well as those of any SETA contractor, are subject to any modifications required by CSBG, Federal or State legislation and their regulations, the State Department of Community Services and Development, and SETA's policies and procedures.

## **FEATURES OF THIS SOLICITATION**

This RFP expects proposals to address the ways in which proposing agencies ensure that Sacramento County's most vulnerable populations are the focus of their service delivery. Response 5 delves into the specific measures taken by the proposing agency to recognize the variety of people in our community, and create an environment where all our customers are welcome, supported, and able to receive the help the proposing agency can offer. This response should include actions the proposing agency adopts to ensure vulnerable populations are a part of the agency culture, rather than nondiscrimination statements. Examples of SETA's response to serving vulnerable populations include: a committee which celebrates different cultures; a continuing professional education committee which offers trainings on working with specific subpopulations in culturally appropriate ways; handouts and promotional materials in multiple languages; and staff at all levels of the agency who reflect the racial/ethnic backgrounds and languages of our clients.

In the interest of promoting a strengths-based approach to economic, mental, and emotional health in Sacramento County, the 2026-2027 CSBG RFP is based on the Strengthening Families and Protective Factors Framework<sup>1</sup>, which promotes building parental resilience, augmenting social connections, promoting parenting and child development strategies, providing concrete support in times of economic need, and fostering the social and emotional competence of children. This same framework can be adopted for families of all sizes, from individuals to multigenerational households.

Both in the CSBG Public Forum and in the research for the Community Needs Assessment, the intersection of multiple factors contributing to poverty was repeatedly apparent. Mental and physical health conditions, low

<sup>1</sup> Center for the Study of Social Policy; The Pathway to Improved Outcomes for Children and Families, Strengthening Families™ Protective Factors Framework Logic Model; [www.CSSP.org](http://www.CSSP.org)

educational attainment, child care challenges, and transportation issues contributed to housing instability. Transportation, child care, and background issues contributed to greater challenges in finding living-wage employment. Immigration status, low educational attainment, and traditional gender roles contributed to limited employment opportunities. In this RFP, Family Self-Sufficiency programs will address multiple issues and identify ways to draw upon the strengths which individuals carry within to take themselves to a new level.

Safety-Net programs should be able to identify how their program fits into a long-term strategy for family self-sufficiency. Successful proposals will describe how the services lead to help in addressing the underlying challenges with employment, housing, and emotional/physical health which led to the crisis in the first place.

## **SOLICITATION**

The purpose of this RFP is to solicit from qualified applicant agencies, proposals designed to promote the statewide priority of Family Self-Sufficiency identified in the SETA 2026-2027 Community Action Plan (CAP) by mitigating root causes of poverty and ameliorating conditions of extreme poverty, for low-income Sacramento County households.

## **QUALIFIED APPLICANT AGENCIES**

- Community Based Organizations
- Private Non-Profit Agencies
- Public Agencies

## **AVAILABLE FUNDS**

CSBG funds available for allocation under this RFP are contingent upon funds being made available to the State Department of Community Services and Development by the United States Government for the purposes of this program. The Federal Budget currently being considered by Congress includes a proposal to eliminate funding for the CSBG program. However, changes to the Budget are being considered by Congress which may alter funding allocations for this and other programs. SETA is moving forward with the procurement process in the event that funds are appropriated by Congress.

Funding for the CSBG program is based on priorities for services and activities as outlined in the SETA 2026-2027 Community Action Plan (CAP). SETA has adopted the statewide priority of Family Self-Sufficiency and has set allocations for the 2026/2027 program year for programs promoting the following service areas: family self-sufficiency, and safety-net services. The relative percentage awarded per program type will be determined when proposals are reviewed, and will be based on the effectiveness of programs in meeting the goals of this RFP.

Final allocation of funding within these service areas is subject to the determination of the SETA Governing Board. Funding to each service area may be eliminated, reduced, or increased and final funding may be allocated to one or more of these service areas in such amounts as the SETA Governing Board ultimately determines in its sole and exclusive discretion. In past years, Family Self-Sufficiency program awards generally ranged from \$48,000 to \$100,000 annually, and Safety-Net program awards ranged from \$25,000 to \$75,000 annually. A similar range of annual award amounts is anticipated for the 2026-2027 program period.

Proposers should be aware that funding is contingent upon the availability of funds, and the possible resulting subaward may be recommended for additional or reduced funding than the amount proposed.

## **COMMUNITY ACTION BOARD AND LOCAL PLAN PRIORITY AREAS**

Services and activities solicited by this RFP adhere to those services and recommendations described in the SETA 2026-2027 Community Action Plan (CAP), approved by the SETA Governing Board on June 5, 2025. A copy of the approved plan is available on the SETA web: [2026/2027 CAP](#). Target activities that reflect the goals, priorities, and recommendations of the CAP will be given the highest consideration for funding. **Although a ranking of each priority is required for the CAP, SETA considers all areas to be a priority.** Each priority is followed by a list of programs, services and activities that may be adopted to address the need in the relevant Agency Priority. As presented in the 2026-2027 Community Action Plan, the following priorities have been identified:

	Agency Priorities	Description of programs, services, activities
1.	Low-income adults, including single mothers, lack education and job skills.	Potential program components include case management, career coaching, job training, job readiness workshops, resume development, support services to help maintain housing and other necessities while in the program, and follow-up once a job has been obtained.
2.	Low-income families lack housing.	Potential program components include case management, rent payments (including first month), mortgage principal payments, utility payments, transitional housing.
3.	Low-income families lack adequate funds for basic necessities such as housing, food, utilities, child care, and transportation.	Potential program components include provision of rent payments, mortgage principal payments, utility payments, food, transportation assistance, employment supports, hygiene kits.
4.	Youth lack the life skills needed to function as self-sufficient and self-actualized adults.	Potential program components include case management, mentoring, organized events, and support services for youth education and employment.
5.	Older adults and people with disabilities lack the resources to maintain self-sufficiency.	Potential program components include case management, job coaching and employment readiness, support services to maintain independence, support groups and group activities for social engagement.
6.	Survivors of domestic violence lack the resources and knowledge to successfully transition to a better life.	Potential program components include case management, job coaching and employment readiness, support services to maintain independence, support groups.

## **ALLOWABLE SERVICES AND ACTIVITIES**

### **A. Family Self-Sufficiency Services (FSS)**

Within the context of this procurement category, family self-sufficiency is defined as an individual's ability to provide for themselves and their family through employment, housing, education, and behavioral and

mental health. Services are intended for households to eliminate or decrease reliance on external assistance. Such external assistance may be physical, emotional, or financial, and may be defined by individual priorities and abilities. In general, proposals funded under the category of FSS will describe a process for stabilizing in-crisis and vulnerable families through case management and the use of support services. This funding category is outcomes-based, meaning the focus of all activities, case management, and client contact is on the end result identified in the proposal. Successful proposals will demonstrate how the agency will create change with the clients it serves, and identify the assessment tools the program will use in determining that growth and change have been achieved.

As previously mentioned, SETA is promoting the Strengthening Families Protective Factors Framework Logic Model as an effective perspective to adopt when writing proposals for the 2026/2027 CSBG proposals. While written to address families with children, it is based on fundamental strength-based principles that apply to families of all sizes and configurations. A summary of this framework is posted on the SETA website along with the CSBG RFP. **Successful proposals will also include emergency support services/incentives. In this category, proposers are expected to allocate a minimum of 15% of the requested CSBG funding for direct support services/incentives available to the CSBG clients.**

To ensure client access to SETA's career and training activities, all FSS employment-based proposers are required to partner and coordinate services with one or more Sacramento Works Job Centers (SWJCs). Success measures in FSS programs with an employment focus will include the number of households securing unsubsidized employment with the support of the case manager, maintaining employment for 90 days, and maintaining employment for 180 days. Proposers are expected to provide ongoing case management and support services through the entire 180 days of employment. Activities proposed and resources provided must be part of an overall household strategy that promotes functional and financial stability, employment, job training or on-the-job training in conjunction with a SWJC site, and long-term self-sufficiency.

In addition to employment, there are many factors that contribute to an individual's ability to provide for themselves and their family. Potential program responses to these factors include services that provide support toward seeking and maintaining stable housing, educational support, and mental and emotional wellness. Other focus areas will gauge success on the number of people who obtain and maintain safe and affordable housing for 90 and 180 days, the number of people who demonstrate improved mental and behavioral health, the number of youth who demonstrate educational improvements, or the number of individuals with disabilities who maintain an independent living situation. **Successful proposers will identify specific evaluation standards which gauge success that reflect best practices in the area of consideration. Family Self-Sufficiency programs emphasize an evidence-based outcomes approach which reflects change in the participants or their life situations. Such change can be behavioral or situational, but it must be measurable.**

SETA recognizes that the funding categories listed may be interconnected, so a proposer may choose more than one service category. Choosing more than one service category means that proposals selected for funding MUST adhere to what is projected on Form 3 of this RFP. SETA will hold proposers accountable for any projections made if selected for funding. Consequently, successful proposers are expected to report on all categories listed in the proposal.



The minimum elements of case management required under this funding category include an identified case manager, a thorough assessment, program goals and benchmarks mutually agreed upon by both the household and case manager, a record of support services justifications, referrals and case manager follow-up results, periodic progress notes and a written plan of action with roles for both staff and appropriate household members. Documentation of the above noted activities and services, in a case file format common to the proposing organization, is required. Reporting achievement of benchmarks identified in FSS projections are dependent upon involvement of the proposing agency's case managers. For example, to report a participant's employment, the proposing agency's staff must demonstrate involvement in the participant's work readiness which led to that employment. To include a participant's housing, the staff must document housing counseling prior to obtaining the housing.

Proposers in the FSS category focus on the long-term self-sufficiency for the following target groups identified as priorities in the 2026-2027 Community Action Plan. The subpopulations of the unhoused or housing insecure, and of single parents with children under the age of 5, will be given priority consideration due to their particular vulnerability.

1. Low-Income Families – Examples of activities for case-managed families may include services that help working age household members plan and prepare to receive job training if appropriate, employment services through a SWJC, information, referrals and referral follow-up, transportation to vital services, housing services, counseling, employment information, financial literacy training, nutrition services, education services, translation and interpretation, advocacy, life skills training, resources to mitigate economic household shortfalls, and frequent follow-up to identify barriers to reaching planned benchmarks and goals.
2. People experiencing homelessness or imminent homelessness – Services may include housing counseling, or housing with case management oversight. Examples of case-managed services for homeless, imminently homeless or formerly homeless families in transitional housing may also include permanent housing placement assistance, financial resources to enter permanent housing, transitional housing, prevention of homelessness, emergency shelter, follow-up for families placed in permanent housing, housing retention workshops for families, support system development and budget counseling, as part of a comprehensive plan leading to independent living and/or employment services through a SWJC.

One option for working with this population would be wraparound services for unhoused or housing-insecure individuals, which may include employment programs at Mather Community Campus or other transitional housing programs. This model has employment as its primary goal, with ample support services available to address barriers to successful employment, such as help with housing costs, training, child care, and employment supports such as clothing and background checks. The proposals should include an overall strategy for promoting comprehensive self-sufficiency, including employment and housing, and case-managed support in obtaining/maintaining both. If this proposal would be incorporated into an existing employment and housing program, it may be proposed as a Safety-Net program.

3. People with Disabilities – Services may include case managed programs to support job search and retention activities, housing, or other recognized strategies for maintaining an independent, healthy lifestyle which respects the dignity of each person. Examples may include job training, employment services through a SWJC, information, referrals and referral follow-up, transportation to vital services, housing services, counseling, employment information, financial literacy training, nutrition services, education services, translation and interpretation, advocacy, life skills training, resources to mitigate

economic household shortfalls, and frequent follow-up to identify barriers to reaching planned benchmarks and goals.

4. Youth – Services should include culturally appropriate case-managed programs that support the development of youth and addressing any barriers. Examples of activities are those that provide support toward increased educational attainment, employment, and basic life skills. This can include services such as providing access to educational resources, tutoring, literacy/financial literacy programs, substance use support, and job/life skills training, mentorship.
5. Single-parent families with children 0-5 (“Two-generation” strategy). Services may include those identified for low-income families, training/workshops on the topics of financial literacy, stress reduction/management, child development and personal/child well-being. For example, activities for case-managed single-parent families with children 0-5 may include planning and preparation for the parent to receive job training and/or be employed while their child(ren) 0-5 are enrolled and engaged in high quality childcare that prepares them for primary school success.
6. Older Adults – Proposals for older adults should include services to assist older adults and disabled older adults in maintaining their housing-of-choice and avoid undesirable higher-level-of-care options and services. Examples of activities for case-managed older adults, and disabled persons 65 years or older include transportation to vital services, culturally and linguistically appropriate in-home visits and telephone check-ins, independent living skills training, legal assistance, advocacy and mental health services and information.
7. Refugees and New Americans – Proposals for Refugees and New Americans may include case managed services that support the transition into American life. Services may include English language classes, employment, housing, education, or translation and evaluation of foreign transcripts.
8. Mental and Behavioral Health – Proposals in this category include case-managed services that support behavioral and mental health in relation to the self-sufficiency of an individual and/or family. Services may include prevention and intervention, counseling, education, crisis planning, and coaching. Proposals should include activities that use demonstrate improved mental and behavioral health and well-being, the reduction or elimination of substance use, and services related to housing, employment, or educational attainment.

## **SPECIAL PROJECTS**

Special Projects proposals are a subset of the Family Self-Sufficiency proposals. They are programs that work with clients on a longer-term basis, to elicit positive change and growth in the population served. Special Projects proposals are distinguished from general programs offered through Family Self-Sufficiency by the greater vulnerability of the population. All Special Projects proposals will adopt a case-managed approach to promote long-term improvement in the lives of the participants.

This proposal type focuses on mentoring programs promoting healthy lifestyles and a future focus for at-risk youth, particularly but not exclusively youth of color. The 2026/2027 Community Needs Assessment identified many factors which contributed to this population meriting special attention, including: higher rates of poverty among 0-17 year olds than the general population; an increase in the juvenile arrest rate from two years earlier, which disproportionately affected youth of color; higher rates of school suspension and

expulsion, and lower rates of high school graduation, for youth who were socioeconomically disadvantaged, homeless, or in foster care.

The following Family National Performance Indicators (FNPIs) will be used to gauge success in proposed programs, and any measurable gains will be assessed using the following benchmarks. Please note, some benchmarks may only be used in conjunction with other benchmarks; these are identified and explained below.

FNPI/Service Area	Description
Employment	1b, The number of unemployed adults who obtained employment (up to a living wage) <sup>1</sup>
	1c, The number of unemployed adults who obtained and maintained employment for at least 90 days (up to a living wage) <sup>1</sup>
	1d, The number of unemployed adults who obtained and maintained employment for at least 180 days (up to a living wage). <sup>1</sup>
Education	2c, The number of children and youth who demonstrated improved positive approaches toward learning, including improved attention skills. (auto total). <sup>2</sup>
	2c1, Early Childhood Education (ages 0-5), <sup>2</sup>
	2c2, 1st grade-8th grade <sup>2</sup>
	2d, The number of children demonstrating achievement at basic grade level, including academic, social, and school success skills
	2d1, Early Childhood Education (ages 0-5) <sup>3</sup>
	2d2, 1 <sup>st</sup> grade-8 <sup>th</sup> grade <sup>3</sup>
	2d3, 9 <sup>th</sup> grade-12 <sup>th</sup> grade <sup>3</sup>
	2h, The number of individuals who obtained a recognized credential, certificate, or degree relating to the achievement of educational or vocational skills.
Housing	4a, The number of individuals experiencing homelessness who obtained safe temporary shelter.
	4b, The number of individuals who obtained safe and affordable housing. <sup>4</sup>
	4c, The number of individuals who maintained safe and affordable housing for 90 days. <sup>4</sup>
	4d, The number of individuals who maintained safe and affordable housing for 180 days. <sup>4</sup>
Health/Nutrition	5c, The number of individuals who demonstrated improved mental and behavioral health and well-being.
	5f. The number of seniors (65+) who maintained an independent living situation.
	5g. The number of individuals with disabilities who maintained an independent living situation.
	5i. The number of individuals with no recidivating event for six months.
	5z. Number of individuals with increased safety from domestic abuse in their homes.
	5z. Number of individuals who secured emergency protection from physical and/or emotional abuse.

<sup>1</sup> Employment benchmarks that must be selected as a group

<sup>2</sup> Must select one or more age/grade levels in addition to 2c

<sup>3</sup> Must select one or more age/grade levels in addition to 2d

<sup>4</sup> Housing benchmarks that must be selected as a group

## B. Safety-Net Services (SN)

In general, proposals funded under the category of Safety-Net services provide emergency assistance on a one-time or limited-time basis to families in crisis. Proposers that connect individuals and families to longer-

term services, through a formal referral process to the proposing agency's programs or to another agency's program, will receive priority in this funding area. Safety-Net services are intended for all CSBG-eligible Sacramento County residents and anyone experiencing homelessness in Sacramento County.

Examples of activities and emergency resources funded under the Safety-Net service category include: nutritious food distribution, redeemable food vouchers, nutritious meals prepared on-site, resources to both maintain and reconnect household energy utilities, off-site shelter (motel) assistance, emergency on-site shelter, miscellaneous items required by an employer for a participant to accept or maintain employment, clothing items/diapers, hygiene items, transportation assistance, first month rental assistance, eviction avoidance assistance, and information and referrals. Activities may also include car repairs, rideshare services to training or other needed short-term activities, assistance with DMV license and registration, and the translation and evaluation of foreign school transcripts. **Proposers are expected to allocate a minimum of 70% of the requested CSBG funding for direct participant costs.**

**The list below contains allowable support services. If a proposal includes additional support services, please be advised that there is no guarantee they will be approved for use in the program. The following is a list of support services used by SETA CSBG delegate agencies in the past. Consistent with SETA policy, support services in the form of gift vouchers are handled on a reimbursement basis, meaning they are issued to clients in exchange for a receipt of equal or greater value for the relevant type of support services. This policy does not apply to incentives issued in the form of gift cards.**

Vocational training, job readiness training, workshops, pre-employment physicals, background checks, school supplies, before and after school activities, rent payments, utility payments, temporary housing such as motel stays and shelters, transitional housing, permanent housing, wellness classes (stress reduction, medication management, mindfulness, etc.), domestic violence programs and/or group meetings, transportation assistance (bus passes, support for minor auto repair, gas cards), help with driver's license and car registration fees (note fines and late fees are not included), criminal record expungements, emergency clothing (including diapers), hygiene kits, and incentives.

Proposers in good standing that offer the broadest array of available CSBG Safety-Net services, and with sites or demonstrated mobile unit service capability in high-poverty target areas identified in the SETA 2026-2027 Community Action Plan, will receive priority for funding in the Safety-Net category. Please refer to page 17 for a list of those target areas.

**Note:** Available Safety-Net emergency resources, funded in whole or in part with CSBG funding, should be made available by Safety-Net providers to any eligible Sacramento County resident. While proposers are encouraged to target services to high poverty areas and populations, CSBG services should not be denied to eligible Sacramento County residents that meet the income and suitability requirements for Safety-Net services.

### **PREQUALIFICATION REQUIREMENTS SUBMITTAL DEADLINE**

**This is a mandatory requirement that must be met by all organizations proposing CSBG services under this RFP.** A copy of SETA's Pre-qualification Requirements is included in Section III of this RFP. Please

note that the deadline for submission of all pre-qualification documents to the SETA Contracts Unit is 4:30 P.M. Wednesday, August 20, 2025. Postmarks and other proofs of mailing will not be accepted.

Any proposing organization that is a current provider for SETA or that has been a former contractor of SETA and has previously met pre-qualification requirements must contact Corey Lagbao, Workforce Development Analyst III, at (916) 263-3838 by 4:30 P.M. Wednesday, August 20, 2025 to advise SETA of its intent to respond to this RFP based upon documentation already on file with the SETA Contracts Unit.

**FAILURE OF A PROPOSING ORGANIZATION TO SUBMIT COMPLETE PRE-QUALIFICATION DOCUMENTS OR TO NOTIFY WORKFORCE DEVELOPMENT ANALYST III, COREY LAGBAO, OF ITS INTENT TO RELY ON PREVIOUSLY SUBMITTED DOCUMENTS BY 4:30 P.M. WEDNESDAY, AUGUST 20, 2025, WILL DISQUALIFY SUCH PROPOSING ORGANIZATION FROM ANY FURTHER FUNDING CONSIDERATION FOR THE FUNDING PERIOD COVERED BY THIS RFP.**

Within 48 hours (2 working days) of the pre-qualification deadline, 4:30 P.M., Wednesday, August 20, 2025, SETA staff will review all submitted or referenced pre-qualification documents and contact, via telephone, those respondents who, at the discretion of the SETA Contracts Unit, need to submit clarifying information or documents.

Requested clarifying information or documents must be received by SETA in a format designated by the SETA Contracts Unit by 4:30 P.M. Monday, August 25, 2025. Failure to provide the SETA Contracts Unit with the requested clarifying information or documents by the 4:30 P.M. Monday, August 25, 2025 deadline will disqualify such proposing organization(s) from any further funding consideration for the period covered by this RFP. Postmarks and other proofs of mailing will not be accepted.

***FAILURE TO MEET THESE REQUIREMENTS BY THE DEADLINES NOTED ABOVE WILL DISQUALIFY PROPOSING ORGANIZATIONS FROM ANY FURTHER FUNDING CONSIDERATION FOR THE FUNDING PERIOD COVERED BY THIS RFP.***

#### **RFP OFFEROR'S CONFERENCE**

The purpose of the Offeror's Conference is to explain the proposal process and provide proposing organizations with the opportunity to raise any questions about the development of their proposals. It is not the intent of this conference to offer individualized technical assistance, but rather to provide examples, clarify information or answer questions relevant to the RFP. Proposers are strongly encouraged to attend the Offeror's Conference.

The Offeror's Conference will be held on:

**Date: Thursday, August 14, 2025**

**Time: 10:00 A.M.**

**Zoom Link: [CLICK HERE](#)**

## **RFP UPDATES**

The requirements for responding to this RFP may be modified or clarified through release of RFP updates. As a result of the Offeror's Conference, and/or based upon information that becomes available after the release of this Request for Proposals, SETA may post updates on its website, [www.seta.net](http://www.seta.net), that modify or clarify information contained in this RFP. Updates will be posted on the website no later than 24 hours before the submittal deadline. Proposing organizations should check the website or contact SETA for updated information prior to final submittal. Proposers that attend the CSBG Offeror's Conference noted above and provide SETA staff with their names and e-mail addresses will be provided with any RFP updates by e-mail, as they occur.

## **PROPOSAL DEADLINE AND SUBMITTAL PROCEDURE**

SETA must receive all proposals no later than 4:00 p.m., Friday, September 5, 2025. Proposals are to be e-mailed in PDF format to:

CSBG Unit Staff  
Email address: [csbg@seta.net](mailto:csbg@seta.net)

In accordance with the policy of the SETA Governing Board, proposals received after 4:00 p.m., September 5, 2025 will not be accepted. **NO EXCEPTIONS. NO APPEALS WILL BE ACCEPTED FOR LATE PROPOSALS.**

To be considered for funding, agencies must submit ONE complete copy of their proposal developed in response to this RFP in electronic form. Confirmation of receipt will be issued by return email, documenting receipt by the proposal deadline. Proposals may also be submitted as an original document, but an electronic version must be emailed to and received by SETA, by the deadline.

The proposal must include the signature of an appropriate official who is authorized to submit the proposal for the responding agency. The proposal must also include documentation indicating by what authority (resolution) the person(s) is/are authorized to negotiate and contractually bind the responding agency, if selected.

The following process will apply to all proposals submitted:

- a. No determination will be made on the responsiveness to the RFP at the time of submittal.
- b. No proposal will be accepted from any person after the submittal deadline; an email confirmation of receipt from CSBG Unit staff at the [csbg@seta.net](mailto:csbg@seta.net) email will function as the record of timely receipt of the proposal.
- c. Staff will inform the Governing Board of any non-responsive proposals to the RFP and those wishing to address the above circumstances will be allowed to do so before the SETA Governing Board.
- d. Testimony to the Governing Board will be given prior to funding hearings in order to allow for consideration of all eligible proposals at one time.

## **TERM OF AGREEMENT**

All CSBG funded agreements will be awarded for a one-year term beginning January 1, 2026 and ending December 31, 2026. After the first program year, funded agreements are subjected to a renewal process to extend for an additional program year beginning January 1, 2027 through December 31, 2027.

## **EXTENSION OF AGREEMENTS**

Every agreement will contain a provision permitting SETA, at any time prior to termination of the agreement, the sole option to extend the term of the agreement for an additional term, consistent with grant funding limitations, but in no event exceeding one (1) year on the same terms and conditions, except that the amount of funding may be less than or greater than the amount identified in the original agreement. In exercising the extension option, SETA will evaluate each delegate's ability to meet its contracted performance goals. In addition, SETA may, in its sole discretion, implement a unilateral modification which may provide for changes in a delegate's performance in order to comply with applicable federal, state and/or SETA regulations, directives or policies.

## **SELECTION PROCEDURES**

Staff recommendations will be made available for public review on the SETA web site ([www.seta.net](http://www.seta.net)) after 3:30 P.M. on Friday, October 31, 2025.

The Community Action Board (CAB) will hold a public meeting on November 12, 2025, to review SETA staff recommendations and to develop CAB recommendations. The CAB will then submit its recommendations to the SETA Governing Board for its review and final approval. Final allocations to proposing organizations shall be made by the Governing Board in its sole and exclusive discretion.

SETA adheres to the provisions of Sections 54954.2 and 54954.3 of the California Government Code, generally known as the Brown Act. Members of the public may address the CAB and the SETA Governing Board on any matter under their jurisdiction.

## **PROTEST PROCEDURES TO RESOLVE PROCUREMENT DISPUTES**

All protests to resolve disputes concerning this RFP shall be written, must specify in detail the grounds of the protest, the facts and evidence in support thereof and the remedy sought. The written protest must be delivered to the Clerk of the Boards at SETA no later than five (5) calendar days prior to the date of any funding determination by the Governing Board. Since November 27 falls on Thanksgiving, the last opportunity to submit a protest will be on Wednesday, November 26, 2025, by 4:30 P.M. In the absence of a timely and properly submitted written protest, no party responding to this RFP shall be eligible for any remedy.

The SETA Governing Board will resolve any protest based upon the written protest and any oral or written response thereto provided by staff. Any SETA Governing Board resolution of the protest will be made prior to any funding determination under this RFP and such resolution by the SETA Governing Board will be deemed final.

## **FORMAL AGREEMENT**

All successful proposing organizations will be required to enter into a standard form delegate agreement with SETA. A copy of the most recent form of this delegate agreement is available for review at SETA. Delegate agreements entered under this RFP will be similar in form and subject to modification required by recent amendments under CSBG and its regulations.

Proposing organizations are advised that, in order to assist the efforts of SETA in targeting its programs, the SETA Governing Board has implemented a policy requiring that all recipients of funds from SETA are required to acknowledge publicly that the program it operates is funded, in whole or in part, by SETA in all public documents or any form of media outreach or advertising. All delegate agreements will contain a provision requiring the delegate to abide by this policy.

### **Expectations of Programs Receiving CSBG Funds**

All programs receiving funds from SETA's Community Services Block Grant program are expected to adhere to the following requirements:

- 1... **Obtain and retain statistical data from each household enrolled**, including demographic data on family members, household characteristics, and income, to determine eligibility.
2. **Require and retain verification of household income from each household enrolled**, such as CalWORKs or SSI award letters, or pay stubs. Please note: primary documents such as these are expected of most CSBG participants; a self-declaration of income should be the exception.
3. **Share the CSBG grievance policy with all participants, and the child support referral procedure with all custodial single parents who are not receiving child support**
4. **Submit a monthly CSBG report to SETA**, as described in the Reporter Training conducted in January of each year.
5. **Maintain case files on all case managed participants**, including the minimum standards of case management described in the "Allowable Services and Activities" section on page 8 of this RFP.
6. **Submit to program and financial audits each calendar year.**
7. **Present the proposer's CSBG program, and its progress serving the community, to the Community Action Board** once each calendar year or as requested by CSBG staff.
8. **Food Banks:** Due to the brief nature of interaction with their patrons, food banks are encouraged to collect as much of the required eligibility information as they are able, but will not be required to complete all fields on the CSBG intake forms. At a minimum, they must collect first/last names, establish income eligibility, and confirm residency in Sacramento County for food bank recipients.

## **PROPOSAL EVALUATION CRITERIA**

The selection of proposing organizations under this RFP is the responsibility of the SETA Governing Board, which bases its final decisions on the recommendations of the CAB.

In order to assist the SETA Governing Board in making funding decisions, SETA staff will evaluate each proposal and provide the CAB with the results of their evaluation in the form of staff recommendations. Staff recommendations will be published and made available to proposing organizations after 3:30 P.M. on Friday, October 31, 2025, and will be based upon an evaluation of proposals submitted, funding priorities for target groups and areas identified in the "Allowable Services and Activities" section (page 10) above, and upon the



proposing organization's past program performance and fiscal accountability, if applicable. Proposing organizations with no recent record of past performance with SETA will provide multiple references of previous funders to be contacted and interviewed by SETA staff.

All proposals will be evaluated based on the proposer's ability to adequately address the required responses and the ability to provide all forms and exhibits outlined in the response section of this RFP (Section II).

### **LIMITATION**

SETA will not pay for any costs incurred by the proposing organization in the preparation of proposals in response to this request. Completion of pre-qualification requirements or a response to this Request for Proposals does not, in any way, commit SETA to award an agreement. SETA reserves the right to accept or reject any or all proposals received in response to this request, to negotiate with all qualified sources, or to cancel in part or in its entirety, this Request for Proposals if it is in the best interest of SETA to do so. If only one responsive proposal is received, SETA will deem this competition to have failed. In such an event, SETA may, in its sole discretion, proceed with sole source procurement or cancel this RFP and proceed with a new competitive procurement. SETA will require successful respondent agencies to participate in negotiations and to submit any programmatic, financial, or other revision of their proposal as may result from negotiations prior to any subgrant finalization. SETA reserves the right to terminate, with or without cause, any subgrantee selected as a result of this RFP process.

### **MODIFICATION OF AGREEMENTS**

Any agreement funded pursuant to this RFP may be unilaterally modified by SETA upon written notice to the delegate under the following circumstances:

- A. The delegate fails to meet its performance standards in a timely manner as set forth in the agreement, or
- B. The federal or state government increases, reduces, or withdraws funds allocated to SETA under CSBG, or
- C. There is a change in federal or state law or regulations or the policies and procedures of the Governor or SETA are amended, revised, or modified.

### **TARGETED GROUPS AND NEIGHBORHOODS**

Proposers are strongly encouraged to review the 2026-2027 SETA Community Action Plan to help identify target groups and neighborhoods with the greatest need for the proposed services.

In the 2026-2027 SETA Community Action Plan, the following service areas have been identified as high poverty areas in Sacramento County, and are considered priority service areas for the purpose of this Request for Proposals.

2023 Poverty Rate by Neighborhood			
Community	Poverty Rate	Community	Poverty Rate
Lemon Hill (95824)	25.6%	Foothill Farms (95842)	18.3%
Arden-Arcade (95821; 95825)	22.4% (95821 19.5%; 95825 25.6%)	Oak Park (95817; 95820)	18.3% (95817 21.2%; 95820 17.2%)
Old North Sac (95815)	21.1%	South Sac (95832)	18.1%
Del Paso Hts. (95838)	20.1%	Rosemont (95826)	16.6%
North Highlands (95660)	19.3%	Florin (95828)	15.1%
Parkway (95823)	18.6%		

Proposers in good standing proposing to serve customers from these high poverty areas identified in the CAP will receive priority funding.

### **CSBG INCOME ELIGIBILITY REQUIREMENTS**

Any Sacramento County household, or person(s) homeless in Sacramento County, is determined eligible for CSBG services if the total combined annual pre-tax income of all household members falls at or below the Federal Poverty Income Guidelines listed below. Households are determined eligible for CSBG services if the total combined annual pre-tax income of all household members falls at or below 200% of the Federal Poverty Income Guidelines listed below. All providers funded through CSBG are responsible for the determination and documentation of eligibility for all households served. **Please note that income eligibility guidelines are subject to change, and may be limited to 125% for the 2026-2027 funding period.** Current 2025 Federal Poverty Income Guidelines are as follows:

#### **Sacramento County Household or Homeless Household in Sacramento County**

<u>Family/Household Size</u>	<u>Annual Income</u> (100% levels in parentheses)
1	\$31,300 (\$15,650)
2	\$39,440 (\$19,720) \$42,300 (\$21,150)
3	\$49,720 (\$24,860) \$53,300 (\$26,650)
4	\$60,000 (\$30,000) \$64,300 (\$32,150)
5	\$72,280 (\$35,140) \$75,300 (\$37,650)
6	\$80,560 (\$30,280) \$86,300 (\$43,150)
7	\$90,840 (\$45,420) \$97,300 (\$48,650)
8*	\$101,120 (\$50,560) \$108,300 (\$54,150)

\*For family units with more than 8 members, add \$11,000 (\$5,500) for each additional person

## **RESIDENCY REQUIREMENTS**

All recipients of CSBG funded services administered by SETA must be residents of Sacramento County or homeless while requesting CSBG services in Sacramento County.

## **SECTION II: INSTRUCTIONS FOR COMPLETING THE PROPOSAL**

### **INSTRUCTIONS FOR COMPLETING THE PROPOSAL**

Organizations proposing a separate program for each of the possible categories, Family Self-Sufficiency (FSS), Safety-Net (SN), or Special Project (SP) **must submit a separate proposal for each.** Organizations submitting a FSS proposal that includes support services as part of the overall program design include those services in the proposal only if they will be provided exclusively to the enrolled, case-managed clients described in the proposal.

Proposal responses should be given the same index labels (Response 1; Response 2; etc.) and organized in the same order as they are requested in this RFP. For Response 3, all Family Self-Sufficiency and Special Project proposals are expected to answer sections a-f; employment-based proposals are expected to answer sections a-h. Each response must be independent and complete. Required forms attached to this RFP may not be altered in any way except to include all requested information.

Each proposal response should be concise, specific and shall not exceed one (1) page in length, including all response components *except* Response 3, which shall not exceed two (2) pages in length. Any portion of the summary or response pages that exceeds the page limits will be removed prior to evaluation, in the interest of fairness to all proposers. Proposing organizations may be requested to provide additional information or increased detail prior to the release of funding recommendations, or during the contracting phase for successful proposing organizations. To achieve the maximum points possible, proposal responses must be consistent with information provided on proposal exhibits and forms.

**Note:** Based on the identified priorities from the 2026/2027 Community Action Plan, it is recognized that individuals may be impacted by more than one condition of poverty. Since low-income community members tend to face multiple barriers to self-sufficiency, it is highly encouraged that proposers focus on an intersection of the various needs faced by the community. For example, this might include mental and behavioral health among the unhoused population, or remedial education for opportunity youth who continue to experience deficits from the pandemic.

### **PROPOSAL FORMAT**

- ◆ Proposals will be accepted in electronic format only.
- ◆ 8 ½ x 11-inch white background pages with 1-inch margins and standard black font (Times New Roman or Arial, 12-point font, recommended).
- ◆ A complete table-of-contents should follow EXHIBIT 1 in the proposal.
- ◆ All pages in the proposal **except for FORMS and EXHIBITS** shall be consecutively numbered.
- ◆ Responses 1, 2, 4, 5 and 6 shall each not exceed one (1) page in length; Response 3 shall not exceed two (2) pages in length.
- ◆ A proposal emailed to [csbg@seta.net](mailto:csbg@seta.net) by the proposal submittal deadline must be reproducible and complete, including all required signatures, exhibits and forms. Incomplete proposals will be deemed non-responsive.

## **PROPOSAL COMPONENTS ASSEMBLY ORDER:**

FORM 1 (Cover Sheet Forms)

EXHIBIT 1 (Authority to Negotiate and Contract)

TABLE OF CONTENTS

PROPOSAL SUMMARY

RESPONSES 1-6 (In numerical order)

FORMS 2-6 (In numerical order)

EXHIBIT 2 (Organizational chart)

EXHIBIT 3 (Job descriptions for all proposed program staff)

**PLEASE DO NOT INCLUDE ANY FURTHER ATTACHMENTS OR LETTERS**

## **PROPOSAL SUMMARY**

Provide a summary, **not to exceed one page in length**, which clearly describes the following:

1. A brief summary of the agency and a description of the program being proposed
2. The services and/or resources intended for program participants
3. How these services and/or resources fit into the agency's mission and goals as a whole
4. How the proposed services align with the identified priorities listed in this RFP
5. A brief outline of the anticipated participants and outcomes

## **PROPOSAL RESPONSES**

### **RESPONSE 1. STATEMENT OF NEED AND DESCRIPTION OF TARGET GROUP AND AREA:**

Provide a complete description of the target group and target area to be served. Provide a description of any barriers that participants typically need to overcome to reach program goals. The description should demonstrate an in-depth understanding of the barriers faced by program participants in this target group and target area. **Not to exceed one page in length.**

Please provide sources for all data and assertions made in the response.

### **RESPONSE 2. LINKING PROGRAM GOALS AND SERVICES:**

Provide a complete description of the proposer's goals and objectives for participants under this proposal. Include a list of all proposed services, resources, and activities, as well as the goals and objectives for each. Responses should clearly outline the direct link between each program goal and the proposed services by explaining how the services will directly contribute to the intended outcomes. Include any workshops or trainings intended for program participants. **Not to exceed one page in length.**

**RESPONSE 3. SERVICE DELIVERY SYSTEM: Not to exceed two pages in length.**

**FAMILY SELF-SUFFICIENCY AND SPECIAL PROJECT SERVICE DELIVERY ONLY:** Describe the timeline of how participant households will be supported, stabilized, and supported to thrive. Responses for this section should include:

- (a) The assessment process and tools utilized for evaluating a participant's eligibility and suitability for the program's services.
- (b) The case management systems that will be in place, including the frequency of case manager/participant follow-ups, how a whole-family, trauma-informed, or another proven approach will be implemented, and any participant tracking processes.
- (c) How participant outcomes will be determined, recorded, evaluated, and, if applicable, adjusted.
- (d) The positive benefit, behavior change, or change in condition that is anticipated through the proposed service.
- (e) The referral and follow-up process for participants who might not have access to the proposer's program and services.
- (f) How a duplication of services will be avoided and how the program will encourage coordination and collaboration with other community agencies.

**EMPLOYMENT-BASED PROPOSALS,** describe how participants will be prepared to undertake employment services through a Sacramento Works Job Center (SWJC) and unsubsidized employment. Proposals with an employment-based approach will also complete sections (g) and (h), below.

- (g) Provide the name of the primary SWJC the proposer will partner with to provide services. Describe the specific services and activities offered to participants by the proposing agency as well as by the SWJC identified in the proposal, and explain how the proposing agency's involvement is an added benefit to the SWJCs support to participants in the search for and securing of employment.
- (h) List the services and resources intended to help participants maintain the unsubsidized employment they have secured, for 90 and 180 days

**SAFETY-NET SERVICE DELIVERY ONLY:** Describe the following aspects of the intended service deliveries.

- (a) The intended process for informing new community members that the proposed services and resources are available at the proposer's service delivery site
- (b) The indicators used to determine that an emergency need exists, for each Safety-Net service proposed
- (c) The time in work days, from customer request to service delivery, for each safety-net service proposed
- (d) The process for connecting clients to other agencies for similar or longer-term services not available at proposer's site, as part of the agency's discussion of longer-term self-sufficiency efforts with the client, including any follow-up actions to be undertaken to ensure that the client is pursuing a long-term self-sufficiency strategy.

(e) A weekly schedule of when community members and participants can have direct access to agency staff, in-person or by phone

(f) Food banks proposing to provide nutritious foods must provide a description of the availability of fresh fruits and vegetables to participants and how customer choice and dietary needs determine package contents. Non-food bank proposers preparing nutritious meals to be consumed on-site, or single-meal packaged lunches for off-site distribution, must provide an example of typical menu or contents.

#### **RESPONSE 4. EXPERIENCE:**

Provide a brief description of the proposing organization's history that includes a chronology of programs implemented during the past 5 years. Give examples of successful past programs and services that have supported participants from the same target group/area in reaching identical or similar program goals to those stated in Response 2. **Not to exceed one page in length.**

If this is a new venture or program strategy, include a description of the proposing organization's capacity to meet the proposed program goals and the rationale for implementing the proposed program strategy.

**RESPONSE 5. CULTURAL AWARENESS:** Society has systematically imposed obstacles to success for marginalized communities. Describe your agency's current efforts to ensure that all of your clients feel welcome, supported, and able to receive the help your agency can offer. Describe specific practices and activities implemented by your agency to ensure all of your agency's clients feel valued and heard, and describe how these efforts would fit into the proposed program design and delivery. This can include linguistic as well as cultural awareness and practices among others. **Not to exceed one page in length.**

#### **RESPONSE 6. BUDGET ITEM JUSTIFICATIONS AND RISK ASSESSMENT:**

(a) Describe the necessity and purpose of each proposed SETA-funded Personnel Cost, Other Cost or Direct Participant Cost noted on **FORM 2, PROGRAM BUDGET AND COST ALLOCATION PLAN**. Describe the organization's capacity to accept fiscal liability for any funds awarded under this RFP.

In the interest of addressing the multiple needs identified in the Community Action Plan (CAP) needs assessment, and the priorities identified by SETA's Community Action Board (CAB), the SETA grants team makes every effort to allocate funding based on need. Since need consistently outweighs funding, we are unable to fund all applications, wholly or in part. **As a result, it is very important that you include the minimum award your agency would be willing to accept and still be able to run the program.** Budget modifications may include increases or decreases in funding levels that exceed proposed levels. **Proposers are also expected to specifically state how the proposing agency would move forward without the CSBG funds.** **Not to exceed one page in length.**

**PROPOSAL FORMS** – All forms can be found in the **Proposing Organization Forms Library**.

**FORM 1. COVER SHEET:** On the first page of the Cover Sheet, marked FORM 1, ALL items must be filled out completely. On the second page of the Cover Sheet, enter the clearly printed name(s) and signature(s) of the proposing organization's duly authorized representative(s). The original Cover Sheet containing the original signatures noted above must be included in the original proposal document whether submitted electronically or as a hardcopy.

**FORM 2. PROGRAM BUDGET AND COST ALLOCATION PLAN:** Include all pages and sections of the form whether entries have been made on them or not. Only use the budget forms included in the Forms

Library section of this RFP, and please do not alter the format in any way.

**FORM 3. SERVICE PROJECTIONS:** Family Self-Sufficiency and Special Project proposers will provide enrollment projections for the program period and key program goals. Safety-Net proposers will **not** complete FORM 3.

**FORM 4. INTERNAL EVALUATION and STANDARDS:** All proposers shall complete all items on this form, except for 9 and 10. Family Self-Sufficiency and Special Project proposers shall complete Internal Evaluation Standard 9. Safety-Net proposers shall complete Internal Evaluation Standard 10.

**FORM 5. COLLABORATIVE PARTNERS:** List all collaborative partners with active roles in implementing the proposed program and describe how they will be linked with, coordinated with, and/or will financially leverage the proposed program.

**FORM 6. REFERENCES:** All proposals must include a completed **References** form. Proposing organizations that currently contract with SETA or have done so within the past 3 years may complete the form by typing or printing “SETA” as the first reference. All other proposing organizations must provide 3 references from funding entities with which they currently contract, or have contracted with, in the past 5 years.

**FORM 7. RFP CHECKLIST (OPTIONAL):** If a proposer wishes to use the optional checklist for this RFP, please include it BEFORE the cover sheet.

## **PROPOSAL EXHIBITS**

**EXHIBIT 1. AUTHORITY TO NEGOTIATE AND CONTRACT:** An original corporate resolution or other valid instrument that certifies the authority of the signatory to negotiate and contractually bind the agency must be included with the submitted proposal.

**EXHIBIT 2. ORGANIZATIONAL CHART:** Proposals must include a program organizational chart that indicates all proposed staff positions and lines of authority through to the Executive Director. Existing staff designated for the proposed program should be named on the organizational chart. Proposed positions not yet filled should be designated as vacant. The organizational chart must be clearly marked “EXHIBIT 2” in the submitted proposal.

**EXHIBIT 3. JOB DESCRIPTIONS:** Provide complete job descriptions for all proposed program staff identified on the proposed program’s organizational chart, EXHIBIT 2. The job descriptions section must be clearly marked “EXHIBIT 3” in the submitted proposal.

**NOTE:** Job titles on organizational charts must match the job titles noted in the Proposal Summary, Program Budget and Cost Allocation Plan, Response 6 Budget Item Justifications, on the job descriptions provided in EXHIBIT 3 and elsewhere in the narrative.

**SECTION III:**  
**PROPOSING ORGANIZATION FORMS LIBRARY AND**  
**DEFINITIONS**



# FORM 1

## COVER SHEET

PY 2026-2027

**Proposal Category:**

☐ Family Self-Sufficiency    ☐ FSS - Special Project    ☐ Safety-Net

**Agency Status (Check one only):**

☐ Community-Based Organization    ☐ Private Non-Profit    ☐ Public

**Applicant Agency:**

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mail Address (if different): \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Total Requested CSBG funds:** \_\_\_\_\_ **Cost Per Participant:** \_\_\_\_\_

**Projected Number of Participants:** \_\_\_\_\_

*NOTE: This entry should be an absolute number (XX) and not a range of numbers (XX – XX).*

**Target Group(s):** \_\_\_\_\_

**Target Area(s):** \_\_\_\_\_

**Assurance and Certification**

I, (We), the undersigned, as the duly authorized representative(s) of the proposing agency, affirm that the information and statements contained within this proposal, to the best of my (our) knowledge, are truthful and accurate, and further, I (we) am (are) duly authorized to submit this proposal from the respondent agency to deliver services. A corporate resolution or other valid instrument is attached as “Exhibit 1” that certifies the authority expressed.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## FORM 2

### COMMUNITY SERVICES BLOCK GRANT BUDGET AND COST ALLOCATION PLAN

Agency Name \_\_\_\_\_ Agreement #: \_\_\_\_\_

Street Address \_\_\_\_\_ ☐Original or ☐Mod #: \_\_\_\_\_

- ☐Safety-Net  
☐Family Self-Sufficiency  
☐Special Project

City \_\_\_\_\_, CA \_\_\_\_\_

Program Contact \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Fiscal Contact \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**BUDGET PERIOD:** From 1/1/2026 through 12/31/2026

BUDGET SUMMARY - COST REIMBURSEMENT	
TYPE OF COST	TOTAL CSBG FUNDED AMOUNT
A. Personnel Costs	
B. Equipment Costs	
C. Other Costs	
D. Direct Participant Costs	
Total Cost	

## **COST ALLOCATION PLAN**

ACTUAL METHODS (Do not give dollar amounts), which will be used to charge/allocate a FAIR SHARE of ACTUAL costs to this budget ("Budget" column) and to cost categories (administration and program) within the budget ("Cost Category").

Cost Item	Please use abbreviations below	
	Budget	Cost Category
A. Personnel Costs		
B. Equipment Costs		
C. Other Costs		
D. Direct Participant Costs		

**ABBREVIATIONS:** (Some commonly used methods. If a method you use is not listed, add it to the list)

DC = Direct Charge: Not a shared cost. ACTUAL costs charged to a budget or cost category will be directly identified with the budget or cost category.

ST = Staff time: Shared Cost. ACTUAL costs will be allocated to a budget or cost category based upon the % of total ACTUAL staff time spent on the budget or cost category.

SF = Square Footage: Shared Cost. ACTUAL costs will be allocated to a budget of cost category based upon the % of ACTUAL space used for the budget or cost category.

SF/ST = Square Footage Combined with Time of Staff Using Space: Shared cost. ACTUAL costs will be allocated to a budget or cost category based upon the % of total ACTUAL space and the % of total ACTUAL staff time within the space used for the budget or cost category.

#S = Number Served: Shared cost. ACTUAL costs will be allocated to a budget based upon the % of total ACTUAL participants served by the budget.

U = Usage: Shared cost. ACTUAL costs will be allocated to a budget or cost category based upon the % of total ACTUAL usage for the budget or cost category. The backup documentation for ACTUAL usage will be: \_\_\_\_.

A. <u>PERSONNEL COSTS</u>		Salary x Months x CSBG % = Funded Amt.			
Job Title	Dates	Full Monthly Salary	# Of Months	CSBG %	Total CSBG Funded Amount
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
	From: _____ To: _____				
<b>Total Salaries</b>					
<b>Total Fringe Benefits:</b> (Employer Contribution Only) _____% of Salaries (Average)					
<b>Total Personnel Costs:</b> (Salaries plus Fringe Benefits)					

B. <u>EQUIPMENT COSTS</u>				
L = Lease R = Rent D = Depreciation	Description of Item	Full Cost Information	CSBG %	Total CSBG Funded Amount
<b>Total Equipment Costs</b>				

C. <u>OTHER COSTS</u>		Costs For This Program	
1. Direct Costs	Full Cost Information	CSBG %	Total CSBG Funded Amount
Site Address:			
<b>Non-Owned:</b> <input type="checkbox"/> Rent <input type="checkbox"/> Lease			
<b>Owned:</b> <input type="checkbox"/> Depreciation			
Utilities			
Telephone			
Office Supplies			
Duplication/Printing			
Other:			
<b>Insurance:</b> Fidelity/Depositors' Forgery			
Property			
General Liability			
Vehicle Liability			
Other:			
<b>Other Costs:</b>			
Other:			
Other:			
<b>Travel:</b>			
Local Mileage:			
Other:			
<b>Total Direct Costs</b>			
<b>2. *Indirect Cost - Approved Rate: ___% x Direct Costs of \$</b>			
<b>Total Other Costs (Direct + Indirect)</b>			

\*Attach copy of approval letter from cognizant agency

D. <u>DIRECT PARTICIPANT COSTS</u>			<i>Total x CSBG % = CSBG Funded Amt.</i>		
Safety-Net or Support Services	Avg. Cost/ Unduplicated Household	Number of Unduplicated Households to Be Served	Total	CSBG %	Total CSBG Funded Amount
Food Bank Distribution					
Food (market gift cards or vouchers)					
Food (brown bags or meals prepared on-site)					
Transportation      Bus Passes					
Gas Cards					
Utility Assistance and Reconnection					
Off-Site Shelter (motel, etc.)					
Eviction Avoidance					
First Month Rental Assistance					
Employment Supports					
Clothing					
Other (Describe)					
Other (Describe)					
Other (Describe)					
<b>Total Direct Participant Costs</b>					

# FORM 3

## 2024 Family Self-Sufficiency and Special Project Program Projections

(For Family Self-Sufficiency and Special Projects only.)

Employment Based Programs			
Projected number of adults to be enrolled (Please include any adults projected to be carried over from the previous program year)	Projected number of adults securing unsubsidized employment	Projected number of employed adults maintaining employment for 90 days	Projected number of employed adults maintaining employment for 180 days
Housing Based Programs			
Projected number of individuals to be enrolled (Please include any households projected to be carried over from the previous program year)	Projected number of individuals securing safe and affordable housing	Projected number of individuals maintaining safe and affordable housing for 90 days	Projected number of individuals maintaining safe and affordable housing for 180 days
Projected number of individuals experiencing homelessness to be enrolled	Projected number of individuals experiencing homelessness who obtained safe temporary shelter	Projected number of enrolled individuals experiencing homelessness case-managed for a month after obtaining temporary shelter	Projected number of enrolled individuals experiencing homelessness securing safe and affordable housing



At-Risk Youth Based Programs (Including Special Projects)			
Projected number of youth to be enrolled (Please include any youth projected to be carried over from the previous program year in this number)	Projected number of youth engaging in program services for at least 60 days	Projected number of youth without a recidivating event for at least 90 days	Projected number of youth without a recidivating event for at least 180 days
Projected number of youth to be enrolled (Please include any youth projected to be carried over from the previous program year in this number)	Projected number of youth engaging in program services for at least 90 days	Projected number of youth demonstrating improved mental/behavioral health and well-being  (Please note: Success must be based on evidence-based pre- and post-test evaluations or other approaches identified in the proposal)	
Older Adult Based Programs			
Projected number of older adults to be enrolled (Please include any households projected to be carried over from the previous program year in this number)	Projected number of older adults who maintained an independent living situation	Projected number of older adults who maintained an independent living situation for 90 days	Projected number of older adults who maintained an independent living situation for 180 days
Disability Based Programs			
Projected number of individuals to be enrolled (Please include any individuals projected to be carried over from the previous program year)	Projected number of individuals who maintained an independent living situation	Projected number of individuals who maintained an independent living for 90 days	Projected number of individuals who maintained an independent living for 180 days

Education Based Programs	
<b>Projected number of children to be enrolled</b> (specify Grade level: <ul style="list-style-type: none"> <li>• Early childhood education (ages 0-5)               <ul style="list-style-type: none"> <li>• 1<sup>st</sup> grade-8<sup>th</sup> grade</li> <li>• 9<sup>th</sup> grade-12<sup>th</sup> grade</li> </ul> </li> </ul>	<b>Projected number of children demonstrating improved positive approaches to learning, literacy, school readiness, and attention skills</b> (Please note: Success must be based on evidence-based pre- and post-test evaluations or other approaches identified in the proposal)
<b>Projected number of children to be enrolled</b> (specify Grade level: <ul style="list-style-type: none"> <li>• Early childhood education (ages 0-5)               <ul style="list-style-type: none"> <li>• 1<sup>st</sup> grade-8<sup>th</sup> grade</li> <li>• 9<sup>th</sup> grade-12<sup>th</sup> grade</li> </ul> </li> </ul>	<b>Projected number of children demonstrating achievement at basic grade level, including academic, social, and school success skills (based on evidence-based pre- and post-tests or other approaches identified in the proposal)</b>
<b>Projected number of individuals to be enrolled</b>	<b>Projected number of individuals who obtained a recognized credential, certificate, or degree relating to the achievement of educational or vocational skills</b>
Programs for Survivors of Domestic Violence	
<b>Projected number of individuals to be enrolled</b>	<b>Projected number of individuals with increased safety from domestic abuse in their homes</b>
<b>Projected number of individuals to be enrolled</b>	<b>Projected number of individuals who secured emergency protection from physical and/or emotional abuse</b>

# FORM 4

## PROGRAM INTERNAL EVALUATION and STANDARDS

Activities Evaluated <i>x Name of Staff Responsible</i>	Frequency of Review <i>(Quarterly, monthly, weekly)</i>	Evaluation Guide
1) Outreach/Recruitment:  <b>x</b> _____		Will ensure that all staff implement the outreach and recruitment plan and target the geographic areas of high need, described in the agency's proposal to provide services.
2) Determination of Eligibility:  <b>x</b> _____		Will ensure that Household Characteristics Intake Forms are complete and include required signatures and dates, and back-up documentation of income and eligibility.
3) Thorough Household Assessment:  <b>x</b> _____		Will ensure that assessments are thorough and go beyond presenting needs to include family structure, history, capacity to benefit from services/resources, past education/training, job skills, family functioning and employment status.
4) Delivery of Service:  <b>x</b> _____		Will ensure that household progress follows the timelines projected in the household's individual service plans and noted in their case file, and that action steps recorded for both the case manager and the client are being completed in a timely manner.
5) Information, Referral and Access to Community Resources:  <b>x</b> _____		Will ensure that households referred to another agency are provided with the times and hours the service may be requested and that the needed services are currently available to eligible households.
6) Fiscal/Program Reports:  <b>x</b> _____		Will ensure that required monthly programmatic and fiscal reports are accurately prepared and submitted in a timely manner.
7) Staff Development:  <b>x</b> _____		Will ensure that all staff performing CSBG services on behalf of SETA are periodically evaluated on their capacity to perform those services and are provided with adequate training or other staff-development resources to perform at an acceptable level.
8) General Program Performance:  <b>x</b> _____		Will ensure that overall CSBG program performance, including a comparison of projected service outcomes and actual service outcomes, will be reviewed by the agency.
9) FSS AND SPECIAL PROJECTS ONLY: Case Manager Meetings and Case File Protocols:  <b>x</b> _____		Will ensure that all case activities are briefly but accurately recorded in the household's case file notes, and that case manager contacts with households are occurring at least monthly.
10) SN PROJECTS ONLY: Projected Services and Outcomes:  <b>x</b> _____		Will ensure that the quarterly delivery of emergency services within the community approximates the quarterly projections of service delivery provided to SETA.

## FORM 5

### COLLABORATIVE PARTNERS

<b><u>Collaborative Partner</u></b> (Family Self-Sufficiency employment proposals should include the SWJC with which they will be collaborating.)	<b>Describe how services will be coordinated, shared, linked and/or financially leveraged with collaborative partners.</b>

## FORM 6

### REFERENCES

References (Agencies/Organizations)	Contact Person and Phone Number	Grant Period, type of service(s) provided, funding source and amount of grant

# **FORM 7 (Optional)**

## **CSBG RFP Checklist**

A complete application must include the following:

- ☐ Form 1: Cover Sheet
- ☐ Exhibit 1
  - ☐ Authority to Negotiate and Contract
- ☐ Table of Contents
- ☐ Response Section
  - ☐ Response 1
  - ☐ Response 2
  - ☐ Response 3
  - ☐ Response 4
  - ☐ Response 5
  - ☐ Response 6
- ☐ Forms
  - ☐ Form 2: Program Budget and Cost Allocation
  - ☐ Form 3: Service Projections (Family Self-Sufficiency and Special Projects Only)
  - ☐ Form 4: Internal Evaluation and Standards
  - ☐ Form 5: Collaborative Partners
  - ☐ Form 6: References
- ☐ Exhibit 2: Organizational Chart
- ☐ Exhibit 3: Job Descriptions

## **PROGRAM DEFINITIONS**

**Collaborative Partner** – For the purposes of this RFP, a collaborative partner is any individual or entity that was a part of the planning of the proposed program, will assume a significant role in its implementation and has acknowledged its commitment to perform its role, as described by the proposing organization. A collaborative partner is not an agency or individual that merely refers prospective clients to the proposing agency.

**Note:** All Family Self-Sufficiency proposers should identify a Sacramento Works Job Center they have arranged to work with as a collaborative partner.

**Community Services Block Grant (CSBG)** - The Community Services Block Grant remains one of the major efforts of the War on Poverty. The purpose of CSBG is to provide flexible dollars for communities to implement locally-determined service programs that promote self-sufficiency and lessen the causes and conditions of poverty when available community resources are inadequate or not accessible.

**Delegate Agency** – A community-based organization, private non-profit agency or public agency selected through the SETA procurement process, with which SETA has contracted to undertake a limited, defined role in implementing one or more components of the SETA 2026-2027 Community Action Plan (available on the SETA web site at [www.seta.net](http://www.seta.net)).

**Household** – An individual or any group of individuals living together as a family economic unit.

**Outcomes** – Outcomes are the measurable physical, financial, behavioral and/or emotional changes brought about by participation in a program designed for that purpose and that remain with program participants after their exit from the program.

**Proposing Organization** – Any community-based, private non-profit or public entity submitting a proposal in response to this RFP for the purpose of performing a component of the 2026-2027 SETA Community Action Plan.

**The Administration for Children and Families (ACF) of the United States (U.S.) Department of Health and Human Services provided financial support for this Request for Proposals and the programs to be funded through it. The award provided 100% of total costs and totaled \$2,130,858. The contents are those of the author. They may not reflect the policies of the U.S. Department of Health and Human Services or the U.S. government.**

**SECTION IV:**

**APPLICANT AGENCY PREQUALIFICATION REQUIREMENTS**

**INSURANCE REQUIREMENTS**



## **APPLICANT AGENCY PREQUALIFICATION REQUIREMENTS**

Each applicant agency must submit one complete copy of each item outlined below that applies to the applicant agency. Should the applicant be a joint venture or consortium, each party to such joint venture or consortium shall comply with the appropriate section in addition to submitting a copy of the "Declaration of Partnership or Joint Venture" (Attachment #9). SETA contracts staff will assist applicant agencies in meeting the prequalification requirements, but it is the applicant's ultimate responsibility to verify with SETA that current documents are on file. Verification can be obtained by contacting Corey Lagbao, Workforce Development Analyst III, at (916) 263-3838 or Corey.Lagbao@seta.net.

**FAILURE TO SUBMIT AND/OR RESPOND TO THESE PREQUALIFICATION REQUIREMENTS NO LATER THAN THE DEADLINE NOTED IN SECTION I OF THE RFP WILL DISQUALIFY APPLICANT AGENCY FROM ANY FURTHER FUNDING CONSIDERATION.**

### **A. DISCLOSURE/CERTIFICATION FORMS PREQUALIFICATION REQUIREMENTS**

(Applicable to all Applicants)

All applicant agencies must submit the following four (4) attachments (Attachments #1 through #4). Each attachment must be signed by an authorized representative(s) of the respondent agency.

1. **Attachment #1 - Fair Political Practices Commission Disclosure Forms**
2. **Attachment #2 - Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion**
3. **Attachment #3 - Certification Regarding Lobbying**
4. **Attachment #4 - Certification Regarding Drug-free Workplace Requirements**

### **B. INSURANCE PREQUALIFICATION REQUIREMENTS** (Applicable to all Applicants)

1. **Attachment #5 - Insurance Authorization**. All applicant agencies must submit an Insurance Authorization form (Attachment #5). The attachment must be signed by an authorized representative(s) of the applicant agency.
2. **Attachment #6 - New Applicant Insurance Questionnaire**. Applicant agencies that are not currently funded by SETA must complete and submit the New Applicant Insurance Questionnaire (Attachment #6) stating the type of insurance and name of company they will use if funded.

## **C. ADMINISTRATIVE PREQUALIFICATION REQUIREMENTS**

### **1. FOR PUBLIC AGENCIES**

- (a) I.R.S. Employer Identification Number

Note: This is a nine-digit number beginning with 94 for most agencies.

- (b) Names and mailing addresses of current Governing Body

- (c) Certification of Accounting System (Attachment #7). To be completed and signed by applicant agency's chief financial officer.

### **2. FOR NON-PROFIT ENTITIES**

- (a) Articles of Incorporation or Organization (include all amendments)

Note: Secretary of State registration stamp must be shown on original articles as filed and any amendments.

- (l) If incorporated in a state other than California, include State of California Certificate of Qualification allowing you to operate here or a current Certificate of Status.

- (b) Current Statement of Information filed with Secretary of State

- (c) Federal Tax-Exempt Status Verification (to include final determination letter, if applicable)

Note: This is a letter granting tax exemption from the Internal Revenue Service. This exemption is separate from the State exemption and requires a separate filing with I.R.S. If newly incorporated, provide copy of application to include notice of I.R.S. receipt.

- (d) I.R.S. Employer Identification Number

Note: This is a nine-digit number beginning with 94 for most corporations.

- (e) State Tax Exempt Status Verification

Note: This is a letter granting tax exemption from the State of California Franchise Tax Board. This exemption requires a separate filing from the Federal since the state does not automatically recognize the Federal Determination.

- (f) Names and mailing addresses of current local Board of Directors.

- (g) Certification of Accounting System (Attachment #8). To be completed and signed by public accountant or certified public accountant.

### **3. FOR PRIVATE FOR-PROFIT ENTITIES**

- (a) Articles of Incorporation or Organization (include all amendments)

Note: Secretary of State registration stamp must be shown on original articles as filed and any amendments.

- (l) If incorporated in a state other than California, include State of California Certificate of

Qualification allowing you to operate here or a current Certificate of Status.

- (b) Current Statement of Information filed with Secretary of State
- (c) I.R.S. Employer Identification Number  
Note: This is a nine-digit number beginning with 94 for most corporations.
- (d) Names and mailing addresses of current Board of Directors.
- (e) Certification of Accounting System (Attachment #8). To be completed and signed by public accountant or certified public accountant.
- (f) If doing business in other than corporate name, provide a copy of current fictitious business name statement.

4. **FOR PRIVATE FOR-PROFIT PARTNERSHIP**

- (a) Declaration of Partnership or Joint Venture (Attachment #9).
- (b) If operating under a "doing business as" entity, provide a copy of current fictitious business name statement.
- (c) I.R.S. Employer Identification Number  
Note: This is a nine-digit number beginning with 94 for most organizations.
- (d) Certification of Accounting System (Attachment #8). To be completed and signed by public accountant or certified public accountant.

5. **FOR PRIVATE FOR-PROFIT SOLE-PROPRIETORSHIP**

- (a) If doing business in other than sole-proprietorship name, provide a copy of current fictitious business name statement.
- (b) I.R.S. Employer Identification Number  
Note: This a nine-digit number beginning with 94 for most entities.
- (c) Certification of Accounting System (Attachment #8). To be completed and signed by public accountant or certified public accountant.

**D. FOR ALL PRIVATE APPLICANTS PROPOSING POSTSECONDARY AND/OR VOCATIONAL EDUCATION CLASSROOM TRAINING**

- 1. An Approval to Operate issued to the Private Postsecondary Educational Institution by the State of California, Department of Consumer Affairs, Bureau for Private Postsecondary Education.

-OR-

- 2. Proof of accreditation issued by the Western Association of Schools and Colleges or other proof of accreditation deemed acceptable by SETA, such as accreditation by one of the following:

- (a) A degree-granting institution accredited by a national or regional accreditation agency recognized by the U.S. Department of Education or by the Committee of Bar Examiners for the State of California;
- (b) A degree-granting institution, unaccredited and unapproved, authorized by filing of public disclosure information (May not issue diplomas under this authority);
- (c) A licensed hospital, issuing diplomas in connection with the operation of the hospital;
- (d) An institution accredited, approved, or licensed as a school by a state board, department or agency; or
- (e) An institution or program (non-degree) accredited by a national or regional accreditation agency recognized by the U.S. Department of Education.

-AND-

- 3. School Catalog approved by the appropriate certifying or accrediting agency or proof that such approval is not granted by such agency.

**E. FOR ALL APPLICANTS PROPOSING ADULT SECONDARY EDUCATION (ADULT BASIC SKILLS, HIGH SCHOOL COMPLETION OR EQUIVALENCY)**

- 1. Documentation of authority to provide Adult Basic Education (ABE), high school completion or equivalency in instruction in California.

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## **CONTRACT POLICY**

Should applicant's proposal be selected for funding, applicant agency must be able to comply with the following requirements:

### **A. Audit**

Before any funds are issued under any subgrant/agreement, funded agency shall submit to SETA a copy of the reports generated in connection with the most recent audit of its financial systems. These reports shall be in a form that complies with the provisions of the "Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards (HHS Super Circular – 45 CFR Part 75).

### **B. Insurance**

Prior to contract execution and commencement of program performance, SETA shall receive from each funded agency's insurer a certificate of insurance, and applicable endorsements issued by the funded agency's insurance carrier, indicating all of the coverage required by SETA's Insurance Requirements as they exist at the time of contract execution. Current requirements are outlined in Attachment #10.

SETA has specific insurance requirements and will require necessary certificates and endorsements in compliance with those requirements in place at the time of contract execution. If an agency's insurance is not in place prior to the start of the program, the agency will not be allowed to start. If an agency's insurance expires during the program and new certificates/endorsements are not received prior to the expiration date, payment will be suspended immediately. Performance will be suspended shortly thereafter if the agency's new insurance certificate(s) is/are not filed with the SETA Contracts Unit.

**Note:** Insurance endorsements must be requested from the insurance underwriter by your insurance agent/broker. This process may take up to two months, so proposers should plan accordingly.

### **C. Resolution**

SETA has a standardized resolution that is required of all public agencies and incorporated entities. The applicant agency's governing body or Board of Directors will be required to adopt the appropriate resolution for the purpose of appointing specific individuals authorized to both sign and negotiate the contract. The resolution requires the original signature of the governing body's or Board of Director's secretary and the affixation of the corporate seal. Should incorporated entities not have a seal, it will be necessary to obtain one prior to contract execution.

Resolutions are not required for sole proprietorships, partnerships, or private-for-profit LLCs.

#### D. Prohibitions

No member of the immediate family of any officer, director, executive or employee of funded agency or SETA shall receive favorable treatment for enrollment in services provided by, or employment with, funded agency, nor shall any individual be placed in a funded employment activity if a member of that individual's immediate family is directly supervised by or directly supervises that individual. In addition, neither funded agency nor any of funded agency's subcontractors shall hire, or cause or allow to be hired, a person into an administrative capacity, staff position or on-the-job training position funded through the award of any grant, if a member of that person's immediate family is employed in an administrative capacity for SETA, funded agency, or any employment contractor of funded agency. However, where an applicable federal, state or local statute regarding nepotism exists which is more restrictive than this provision, funded agency and funded agency's subcontractors shall follow the federal, state or local statute in lieu of this provision.

- (a) The term "member of the immediate family" includes: wife, husband, son, daughter, mother, father, brother, brother-in-law, sister, sister-in-law, son-in-law, daughter-in-law, father-in-law, mother-in-law, grandfather, grandmother, grandchild, aunt, uncle, niece, nephew, step-parent, and step-child.
- (b) The term "administrative capacity" refers to positions involving overall administrative responsibility for a program, including members of SETA's Governing Board and any of its affiliated Boards or Councils and members of the governing body or board of directors of funded agency, or where that individual would be the supervisor of an individual paid with funds provided through the award of any grant or performing duties under the grant award.
- (c) The term "staff position" refers to all staff positions providing services through the award of any grant.

**COMPLIANCE WITH CALIFORNIA GOVERNMENT CODE SECTION 84308**

In order to comply with the provisions of California Government Code Section 84308 and the Regulations of the California Fair Political Practices Commission, each respondent must fully complete the "Party Disclosure Form". Additionally, all participants (as defined in the attached "Participant Disclosure Form") identified by the respondent in the proposal must file the "Participant Disclosure Form". If other individuals or entities become or are identified as parties or agents during the time the Workforce Investment Board or Sacramento Employment and Training Agency is considering a respondent's proposal, additional Party Disclosure Forms must be filed with the Sacramento Employment and Training Agency. Participants who are later identified will be requested to file a "Participant Disclosure Form."

Government Code Section 84308

**PARTICIPANT DISCLOSURE FORM**

Information Sheet

SACRAMENTO EMPLOYMENT AND TRAINING AGENCY

This form must be completed by participants in a proceeding involving a license, permit, or other entitlement for use, including a subgrant or contract, pending before the Sacramento Employment and Training Agency.

Important Notice

Basic Provisions of Section 84308

- I. You are prohibited from making a campaign contribution of \$250 or more to any Sacramento Works, Inc. (Local Workforce Development Board) or Sacramento Employment and Training Agency board member or any candidate for such a position. This prohibition starts on the date you begin to actively support or oppose an application of a license, permit, or other entitlement for use pending before Sacramento Works, Inc. or the Sacramento Employment and Training Agency, and continuing until three months after a final decision is rendered on the application or proceeding by Sacramento Works, Inc. or the Sacramento Employment and Training Agency.

No Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or candidate may solicit or receive a campaign contribution of \$250 or more from you and/or your agent during this period if the board member or candidate knows or has reason to know that you are a participant.

- II. The attached disclosure form must be filed if you or your agent have contributed \$250 or more to any Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or candidate for the Sacramento Works, Inc. Board or the Sacramento Employment and Training Agency Governing Board during the 12-month period preceding the beginning of your active support or opposition. It will assist the board members in complying with the law.
- III. If you or your agent have made a contribution of \$250 or more to any Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or candidate during the 12 months preceding the decision in the proceeding, that board member must disqualify himself or herself from the decision. However, disqualification is not required if the board member or candidate returns the campaign contribution within 30 days of learning about both the contribution and the fact that you are a participant to the proceeding.

This form should be completed and filed the first time that you lobby in person, testify in person before, or otherwise directly act to influence the vote of the members of the board of either Sacramento Works, Inc. or Sacramento Employment and Training Agency.

1. An individual or entity is a "participant" in a proceeding involving an application for a license,



permit or other entitlement for use, including a subgrant or contract, if:

- A. The individual or entity is not an actual party to the proceeding, but does have a significant financial interest in the decision of the proceeding before Sacramento Works, Inc. or Sacramento Employment and Training Agency.

AND

- B. The individual or entity, directly or through an agent, does any of the following:
  - (1) Communicates directly, either in person or in writing, with a member of the board of Sacramento Works, Inc. or Sacramento Employment and Training Agency for the purpose of influencing the member's vote on the application or proposal;
  - (2) Communicates with an employee of Sacramento Works, Inc. or the Sacramento Employment and Training Agency for the purpose of influencing a board member's vote on the application or proposal; or
  - (3) Testifies or makes an oral statement before the board of Sacramento Works, Inc. or Sacramento Employment and Training Agency during a proceeding on a license, permit or other entitlement for use for the purpose of influencing the decision of the board of Sacramento Works, Inc. or Sacramento Employment and Training Agency.
- 2. A proceeding involving "a license, permit or other entitlement for use" includes all business, professional, trade and land use licenses and permits and all other entitlements for use, including all entitlements for land use, all contracts (other than competitively bid, labor or personal employment) and all franchises.
- 3. Your "agent" is someone who represents you in connection with a proceeding involving a license, permit or other entitlement for use. If an agent is acting in his or her capacity as an employee or member of a law, architectural, engineering, consulting firm, or similar business entity or corporation, both the business entity or corporation and the individual are agents.
- 4. To determine whether a campaign contribution of \$250 or more has been made by a participant or his or her agent, campaign contributions made by the participant within the preceding 12 months must be aggregated with those made by the agent within the preceding 12 months or the period of the agency, whichever is shorter. Campaign contributions made to different Sacramento Works, Inc. or Sacramento Employment and Training Agency board members or candidates are not aggregated.

This notice summarizes the major requirements of Government Code Section 84308 of the Political Reform Act and 2 Cal. Adm. Code Sections 18438.1 - 18438.8. For more information, contact Corey Lagbao, Workforce Development Analyst III, at (916) 263-3838 or Corey.Lagbao@seta.net, or contact the Fair Political Practices Commission, 428 J Street, Suite 620, Sacramento, California, 95814, (916) 322-5660.

Prepared based upon the forms recommended by the Legal Division of the Fair Political Practices Commission 8/85.

**Participant Disclosure Form**

## SACRAMENTO EMPLOYMENT AND TRAINING AGENCY

Participant's Name: \_\_\_\_\_

Participant's Address: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Phone)

Title of Request for Proposals for which proposal is hereby submitted:

\_\_\_\_\_

Sacramento Works, Inc. or Sacramento Employment and Training Agency board member to whom you and/or your agent made campaign contributions in aggregation of \$250 or more and dates of contributions:

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Participant): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Participant): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Participant): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

(Use additional sheet, if necessary)

☐

No contributions made.

DATE: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Participant and/or Agent)

Government Code Section 84308

**PARTY DISCLOSURE FORM**  
Information Sheet

SACRAMENTO EMPLOYMENT AND TRAINING AGENCY

This form must be completed by applicants for, or persons who are the subject of, any proceeding involving a license, permit, or other entitlement of use, including a subgrant or contract, pending before Sacramento Works, Inc. or the Sacramento Employment and Training Agency.

**Important Notice**

Basic Provisions of Section 84308

- I. You are prohibited from making a campaign contribution of \$250 or more to any Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or any candidate for such position. This prohibition begins on the date your proposal is filed or the proceeding is initiated, and the prohibition ends three months after a final decision is rendered by Sacramento Works, Inc. or the Sacramento Employment and Training Agency. In addition, no Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or candidate may solicit or accept a campaign contribution of \$250 or more from you during this period.  
  
These prohibitions also apply to your agents, and, if you are a closely held corporation, to your majority shareholders, as well.
- II. You must file the attached disclosure form and disclose whether you or your agent(s) have in the aggregate contributed \$250 or more to any Sacramento Works, Inc. or Sacramento Employment and Training Agency board member, or any candidate for the position during the 12-month period preceding the filing of the application or the initiation of the proceeding.
- III. If you or your agent have made a contribution of \$250 or more to any Sacramento Works, Inc. or Sacramento Employment and Training Agency board member or candidate during the 12 months preceding the decision on the application or proceeding, that board member must disqualify himself or herself from the decision. However, disqualification is not required if the board member or candidate returns the campaign contribution within 30 days of learning about both the contribution and the proceedings.
  1. A proceeding involving "a license, permit, or other entitlement for use" includes all business, professional, trade and land use licenses and permits, and all other entitlements for use, including all entitlements for land use, all contracts (other than competitively bid, labor or personal employment) and all franchises.

2. Your "agent" is someone who represents you in connection with a proceeding involving a license, permit or other entitlement for use. If an agent is acting in his or her capacity as an employee or member of a law, architectural, engineering, consulting firm, or similar business entity or corporation, both the business entity or corporation and the individual are agents.
3. To determine whether a campaign contribution of \$250 or more has been made by you, campaign contributions made by you within the preceding 12 months must be aggregated with those made by your agent within the preceding 12 months or the period of the agency, whichever is shorter. Campaign contributions made to different Sacramento Works, Inc. or Sacramento Employment and Training Agency board members or candidates are not aggregated.

This notice summarizes the major requirements of Government Code Section 84308 of the Political Reform Act and 2 Cal. Adm. Code Sections 18438.1 - 18438.8. For more information, contact Corey Lagbao, Workforce Development Analyst III, at (916) 263-3838 or [Corey.Lagbao@seta.net](mailto:Corey.Lagbao@seta.net), or the Fair Political Practices Commission, 428 J Street, Suite 620, Sacramento, California, 95814, (916) 322-5660.

Prepared based upon the forms recommended by the Legal Division of the Fair Political Practices Commission 8/85.

**Party Disclosure Form**      SACRAMENTO EMPLOYMENT AND TRAINING AGENCY

Party's Name: \_\_\_\_\_

Party's Address: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

(Phone)

Title of Request for Proposals for which proposal is hereby submitted:

\_\_\_\_\_

Sacramento Works, Inc. or Sacramento Employment and Training Agency board member to whom you and/or your agent made campaign contributions in aggregation of \$250 or more and dates of contributions:

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Party): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Party): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

Name of Board Member: \_\_\_\_\_

Name of Contributor (if other than Party): \_\_\_\_\_

Date(s): \_\_\_\_\_

Amount: \_\_\_\_\_

(Use additional sheet, if necessary)

☐ No contributions made.

DATE: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Party and/or Agent)

**SACRAMENTO EMPLOYMENT AND TRAINING AGENCY**  
**Governing Board**

Chair

**Supervisor Rich Desmond**

County of Sacramento  
700 H Street, Suite 2450  
Sacramento, CA 95815  
(916) 874-5471  
e-mail: [richdesmond@saccounty.gov](mailto:richdesmond@saccounty.gov)

Vice Chair

**Councilmember Eric Guerra**

City of Sacramento  
915 I Street, 5<sup>th</sup> Floor  
Sacramento, CA 95814  
(916) 808-7006  
(559) 741-6781 (Johnny Wong)  
FAX: (916) 808-7680  
e-mail: [eguerra@cityofsacramento.org](mailto:eguerra@cityofsacramento.org)

**Councilmember Mai Vang**

City of Sacramento  
915 I Street, 5<sup>th</sup> Floor  
Sacramento, CA 95814  
(916) 808-5071  
e-mail: [myvang@cityofsacramento.org](mailto:myvang@cityofsacramento.org)

**Supervisor Patrick Kennedy**

County of Sacramento  
700 H Street, Suite 2450  
Sacramento, CA 95814  
(916) 874-5481 (Rachael Mogavero)  
FAX: (916) 874-7593  
e-mail: [kennedyp@saccounty.gov](mailto:kennedyp@saccounty.gov)

Public Representative

Vacant

*Current as of June 18, 2025*

**Certification Regarding  
Debarment, Suspension, Ineligibility and Voluntary Exclusion  
Lower Tier Covered Transactions**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension.

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS FOR CERTIFICATION)

- (1) The prospective recipient of federal assistance funds certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- (2) Where the prospective recipient of federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

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Name and Title of Authorized Representative

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Signature

---

Date

## Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of federal assistance funds shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective recipient of federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms *covered transaction*, *debarred*, *suspended*, *ineligible*, *lower tier covered transaction*, *participant*, *person*, *primary covered transaction*, *principal*, *proposal* and *voluntarily excluded*, as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of federal assistance funds agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective recipient of federal assistance funds further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions", without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Procurement or Non-procurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.



**CERTIFICATION REGARDING LOBBYING**

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for subawards at all tiers (including subcontracts, subgrants and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name and Title of Authorized Signatory

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Date

Approved by OMB  
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure.)

58

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime federal recipient, at the initiation or receipt of a covered federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered federal action.
2. Identify the status of a covered federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the federal program name or description for the covered federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate federal identifying number available for the federal action identified in item 1 (e.g., Request for Proposals (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered federal action where there has been an award or loan commitment by the federal agency, enter the federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with federal officials. Identify the federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

**DISCLOSURE OF LOBBYING ACTIVITIES**

Approved by OMB

**CONTINUATION SHEET**

0348-0046

Reporting Entity: \_\_\_\_\_ Page \_\_\_\_ of \_\_\_\_

**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**Certification Regarding Drug-Free Workplace

The undersigned certifies that it will or will continue to provide a drug-free workplace by:

- (A) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the subrecipient's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (B) Establishing an ongoing drug-free awareness program to inform employees about:
  - (1) The dangers of drug abuse in the workplace;
  - (2) The subrecipient's policy of maintaining a drug-free workplace;
  - (3) Any available counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (C) Making it a requirement that each employee to be engaged in the performance of any subgrant be given a copy of the statement required by paragraph (A);
- (D) Notifying the employee in the statement required by paragraph (A) that, as a condition of employment under the subgrant, the employee will:
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer, in writing, of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five (5) calendar days after such conviction;
- (E) Notifying the Sacramento Employment and Training Agency (hereinafter referred to as the SETA), in writing, within ten (10) calendar days after receiving notice under paragraph (D)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every subgrant officer or other designee on whose subgrant activity the convicted employee was working, unless the SETA has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected subgrant;
- (F) Taking one of the following actions, within thirty (30) calendar days of receiving notice under paragraph (D)(2), with respect to any employee who is so convicted:
  - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency.
- (G) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A), (B), (C), (D), (E) and (F).

The subrecipient may insert in the space provided below the site(s) for the performance of work done in connection with the specific subgrant:

Place of Performance (Street address, city, county, state, zip code)

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☐ Check if there are workplaces on file that are not identified here.

\_\_\_\_\_  
(Name of Organization)

BY: \_\_\_\_\_  
(Signature of Authorized Representative)

\_\_\_\_\_  
(Typed Name and Title)

\_\_\_\_\_  
(Date)

## INSTRUCTIONS FOR CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

1. By signing and/or submitting this application or subgrant agreement, the subrecipient is providing the certification required by 20 CFR §667.200(d) and 29 CFR Part 98.
2. The certification is a material representation of fact upon which reliance is placed when the Sacramento Employment and Training Agency (hereinafter referred to as the SETA) awards the subgrant. If it is later determined that the subrecipient knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the SETA, in addition to any other remedies available, may take action authorized under the Drug-Free Workplace Act.
3. Workplaces under subgrants, for subrecipients other than individuals, need not be identified on the certification. If known, they may be identified in the subgrant application. If the subrecipient does not identify the workplaces at the time of application, or upon award, if there is no application, the subrecipient must keep the identity of the workplace(s) on file in its office and make the information available for inspection. Failure to identify all known workplaces constitutes a violation of the subrecipient's drug-free workplace requirements.
4. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the subgrant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority while in operation, employees in each local office, etc.).
5. If the workplace identified to the agency changes during the performance of the subgrant, the subrecipient shall inform the SETA of the change(s), if it previously identified the workplaces in question (see paragraph 3).
6. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Subrecipient's attention is called, in particular, to the following definitions from these rules:

*Controlled substance* means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

*Conviction* means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes;

*Criminal drug statute* means a federal or non-federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

*Employee* means the employee of a subrecipient directly engaged in the performance of work under a subgrant, including:

- (i) All *direct charge* employees;
- (ii) All *indirect charge* employees unless their impact or involvement is insignificant to the performance of the subgrant; and,
- (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the subgrant and who are on the subrecipient's payroll. This definition does not include workers not on the payroll of the subrecipient (e.g., volunteers, consultants or independent contractors not on the subrecipient's payroll).



**INSURANCE AUTHORIZATION**

☐ We do not presently have a contract with SETA.  
Our completed NEW APPLICANT INSURANCE QUESTIONNAIRE is attached.

☐ We currently have a contract with SETA.

IT IS ACKNOWLEDGED THAT IT IS OUR ORGANIZATION'S SOLE OBLIGATION TO PROCURE INSURANCE COVERAGE IN CONFORMANCE WITH SETA'S REQUIREMENTS.

AUTHORIZATION IS HEREBY GIVEN TO SETA TO CONTACT OUR ORGANIZATION'S INSURANCE AGENT(S) OR BROKER(S) AND/OR INSURANCE COMPANIES IN ORDER TO CONFIRM THAT OUR ORGANIZATION'S INSURANCE COVERAGE MEETS SETA'S REQUIREMENTS.

\_\_\_\_\_  
(Name of Corporation/Entity)

\_\_\_\_\_  
(Signature of Authorized Representative)

\_\_\_\_\_  
(Typed Name and Title)

\_\_\_\_\_  
(Date)

NEW APPLICANT INSURANCE QUESTIONNAIRE

Name of Corporation/Entity: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

1. FIDELITY AND DEPOSITORS' FORGERY COVERAGES

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Bond Limit: \_\_\_\_\_

D. Deductible: \_\_\_\_\_

E. Expiration Date: \_\_\_\_\_

2. PROPERTY COVERAGE

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Property Limit: \_\_\_\_\_

D. Deductible: \_\_\_\_\_

E. Valuation: ☐ Replacement Cost ☐ Actual Cash Value

F. Expiration Date: \_\_\_\_\_

3. GENERAL LIABILITY COVERAGE

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Limit: \_\_\_\_\_

D. Deductible: \_\_\_\_\_

E. Coverage Form: ☐ Occurrence Type ☐ Claims Made Type

F. Expiration Date: \_\_\_\_\_

4. VEHICLE LIABILITY COVERAGE

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Limit: \_\_\_\_\_

D. Deductible: \_\_\_\_\_

E. Expiration Date: \_\_\_\_\_

5. PROFESSIONAL LIABILITY (IF ANY)

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Limit: \_\_\_\_\_

D. Expiration Date: \_\_\_\_\_

6. WORKERS' COMPENSATION

A. Insurance Company: \_\_\_\_\_

B. Policy Number: \_\_\_\_\_

C. Expiration Date: \_\_\_\_\_

7. INSURANCE BROKER OR AGENT

A. Name of Agency: \_\_\_\_\_

B. Address: \_\_\_\_\_

C. Phone Number: \_\_\_\_\_

FOR USE BY PUBLIC AGENCIES ONLY

Date: \_\_\_\_\_

Anita Maldonado  
Executive Director  
Sacramento Employment and Training Agency  
925 Del Paso Blvd.  
Sacramento, CA 95815-3608

Dear Anita Maldonado,

I am the Chief Financial Officer of \_\_\_\_\_  
(Name of applicant agency)  
and, in this capacity, I will be responsible for providing financial services adequate to ensure the  
establishment and maintenance of an accounting system for \_\_\_\_\_  
(Name of applicant agency)  
\_\_\_\_\_.

The accounting system and internal control procedures will be adequate to safeguard the assets of  
such agency, check the accuracy and reliability of accounting data, promote operating efficiency, and  
provide compliance with prescribed management policies of the agency.

\_\_\_\_\_  
(Signature of Financial Officer)

\_\_\_\_\_  
(Typed Name of Financial Officer)

\_\_\_\_\_  
(Title)

FOR USE BY: PRIVATE NON-PROFIT CORPORATIONS  
PRIVATE FOR-PROFIT CORPORATIONS  
PRIVATE FOR-PROFIT PARTNERSHIP  
PRIVATE FOR-PROFIT SOLE-PROPRIETORSHIP

Date: \_\_\_\_\_

Anita Maldonado  
Executive Director  
Sacramento Employment and Training Agency  
925 Del Paso Blvd.  
Sacramento, CA 95815-3608

Dear Anita Maldonado,

I am a duly licensed or Certified Public Accountant and have been engaged to examine and report on the adequacy of the financial accounting system of \_\_\_\_\_,  
(Name of applicant agency)  
which is a private \_\_\_\_\_ organization located in \_\_\_\_\_.  
(non-profit/for-profit) (name of city)

I have reviewed the accounting system that this organization has established and, in my opinion, it includes internal controls adequate to safeguard the assets of the organization, check the accuracy and reliability of accounting data, promote operating efficiency, and provide compliance with prescribed management policies of the agency.

\_\_\_\_\_  
(Signature of Accountant)

\_\_\_\_\_  
(Typed Name of Accountant)

\_\_\_\_\_  
(License Number and Expiration Date)

\_\_\_\_\_  
(Name of Firm)

\_\_\_\_\_  
(Typed Name)

**DECLARATION OF PARTNERSHIP OR JOINT VENTURE**

The undersigned do hereby declare as follows:

1. The business organization known as \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

is a \_\_\_\_\_  
(General partnership or joint venture)

2. The following represents a complete list and disclosure of all the individual \_\_\_\_\_

\_\_\_\_\_  
(General partners or joint ventures)

Name

Mailing Address (City, State, Zip)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____

Each of the undersigned does hereby declare under the penalty of perjury that the foregoing is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Typed Name)

**SACRAMENTO EMPLOYMENT AND TRAINING AGENCY****INSURANCE REQUIREMENTS****(Pursuant to SETA Governing Board Action on 7/06/2017)**

These requirements apply to all individuals and entities funded by SETA, including, but not limited to, program operators, sub-grantees, vendors, and contractors (each an "Insured"). Prior to sub-grant or contract execution, commencement of program performance and/or disbursement of any funds, SETA shall receive from each Insured's insurer an original, computer-generated, or faxed policy declarations page, certificate of insurance and copies of required endorsements.

**GENERAL REQUIREMENTS**

1. POLICY DECLARATIONS PAGE MUST INCLUDE: All required insurance coverage in amounts not less than those specified in the required coverages provided herein.
2. CERTIFICATES OF INSURANCE MUST INCLUDE:
  - A. Insuring Company's Name;
  - B. Full Mailing Address of Insurance Company's Issuing Branch Office;
  - C. Policy Number(s);
  - D. Policy Effective and Expiration Date(s);
  - E. Policy Limits;
  - F. Deductible(s) or statement that "No deductible is applicable";
  - G. For General Liability Coverage, confirmation that "occurrence type" coverage rather than "claims made type" coverage is provided.
  - H. Certificates must include an original signature or an original stamp of the agent's signature;
  - I. Notice of Cancellation, stated in the following way:

"This insurance shall not be canceled, limited, or non-renewed until after thirty (30) days advance written notice has been given to the Sacramento Employment and Training Agency, except in the event of non-payment of premium when a ten (10) day advance written notice shall apply."

**SHOULD ANY OF THESE ITEMS BE MISSING, THE CERTIFICATE IS UNACCEPTABLE**

3. REQUIRED INSURANCE ENDORSEMENTS: The insurance policy number must appear on all endorsements and required endorsements applicable to the Insured shall provide the following:
  - A. Additional Insured Endorsements must be stated in one of the following two ways: 1) an individual endorsement naming "the Sacramento Employment and Training Agency and its officers, employees and volunteers as additional insureds;" or 2) a blanket endorsement stating that any entity required by a written contract or written agreement with the Named Insured is included as an additional insured.
  - B. Loss Payee Endorsements must be stated in the following way: "The Sacramento Employment and Training Agency is named as a loss payee as its interest may appear."

- C. Notice of Cancellation Endorsements must be stated in the following way: "This insurance shall not be canceled, limited, or non-renewed until after thirty (30) days advance written notice has been given to the Sacramento Employment and Training Agency, except in the event of non-payment of premium when a ten (10) day advance written notice shall apply."
- D. Primary and Non-contributory Endorsements must be stated in the following way: "This insurance is primary and non-contributory as to any insurance and/or self-insurance maintained by the Sacramento Employment and Training Agency."

#### 4. SELF-INSURANCE

If any coverage is provided by self-insurance, SETA requires a letter from the Insured, which will be incorporated into the contractual document as an Exhibit or Special Condition, stating that:

- A. It agrees to SETA's insurance requirements as stated herein and SETA will be indemnified as if standard insurance coverage was in place;
- B. It will maintain a minimum reserve of the amount of self-insured retention over and above all known incurred claims filed against the self-insurance fund;
- C. The reserve is fully funded; and,
- D. No federal or SETA funds will be called upon to fund any losses resulting from any SETA-funded subgrant or contract.

A sample letter will be provided upon request.

#### 5. DEDUCTIBLES AND SELF-INSURED RETENTIONS

Any deductibles or self-insured retentions must be declared to and approved by SETA. In the sole discretion of SETA, SETA may require an Insured to reduce or eliminate such deductibles or self-insured retentions with respect to SETA, its officers, employees, and volunteers.

**NO SETA FUNDS MAY BE USED TO FUND OR OTHERWISE PAY FOR ANY DEDUCTIBLES, SELF-INSURED RETENTIONS AND/OR SELF-INSURANCE.**

#### 6. ADDITIONAL INSURANCE COVERAGE

SETA reserves the right to require an Insured to obtain additional insurance coverage should the funded activities or services provided require additional coverage. This is especially true for multi-funded agencies. Additional coverage might include, but is not limited to, increased policy limits or coverages for professional liability and/or incidental malpractice. Increased policy limits might be addressed by increasing the general aggregate limits, obtaining excess coverage, and/or procuring a policy solely to insure SETA-funded activities or services.

#### 7. COPIES OF POLICIES

SETA reserves the right to require an Insured to provide SETA with complete copies of all insurance policies.



## 8. INSURANCE CARRIER REQUIREMENTS

All coverages shall be procured through a carrier with an AM Best Rating of A-VIII or greater. \* If any coverage is canceled, revoked, reduced, or in any manner questioned or compromised, SETA shall not make any further disbursements to an Insured until SETA is satisfied that the coverage initially approved by SETA has been reinstated. Failure to provide timely evidence of continuing coverage shall result in suspension of all payments or reimbursements and/or suspension of performance. Additionally, should there be inadequate coverage or any lapse(s) in coverage, SETA shall not reimburse for any costs incurred during any period for which the required insurance coverage was not in effect.

\*(Coverage provided by State Compensation Insurance Fund is excepted from this requirement)

## 9. EXPIRING INSURANCE REPLACEMENT COVERAGE

In the event insurance coverages expire at any time or times during the term of the subgrant, contract and/or program performance, the Insured shall provide, at least thirty (30) calendar days prior to said expiration date, new evidence of insurance coverage(s) and endorsements as provided for herein for not less than the remainder of the term of the subgrant, contract or program performance.

## REQUIRED COVERAGES

### 1. FIDELITY AND DEPOSITORS' FORGERY COVERAGES

#### A. Required Limits:

Amount of grant or contract if less than \$25,000; or  
\$25,000 or twenty percent (20%) of the total amount of the grant or contract, whichever is greater.

#### B. Required Endorsements:

1. Loss Payee Endorsement
2. Notice of Cancellation Endorsement

### 2. PROPERTY COVERAGE

#### A. Required Coverage:

Insurance which is at least as broad as the current ISO Special Form Causes of Loss (CP 1030) policy, formerly known as "all risks," as well as insurance covering boiler and machinery and compliance with ordinances or laws, if appropriate, for the full 100% insurable replacement cost of the property. Such insurance shall name SETA as an additional insured as its interests in the property may appear and shall include a waiver of subrogation in favor of SETA.

B. Required Endorsement:

1. Notice of Cancellation Endorsement.

3. GENERAL LIABILITY COVERAGEA. Type of Policy/Coverage:

All policies must be written on an occurrence-type policy form which is at least as broad as the most current ISO Commercial General Liability (CG 0001) policy, insuring liability arising from premises; operations; independent contractors; incidental medical malpractice and garage keepers liability as appropriate given the nature of the Funded Agency's business; personal injury and advertising injury; products-completed operations; and liability assumed under an insured contract.

SEXUAL ABUSE LIABILITY COVERAGE

Insureds whose operations involve interaction with youth (ages to 18 years) must include "Sexual Abuse liability coverage" at limits not less than \$1,000,000 per occurrence. Such coverage can be written on a stand alone basis or made part of the Insured's Commercial General Liability Insurance.

Claims-made policies are not acceptable.

B. Required Limits:

\$1,000,000 per occurrence and \$2,000,000 general aggregate for bodily injury and property damage.

C. Required Endorsements:

1. Additional Insured Endorsement
2. Primary and Non-contributory Endorsement
3. Notice of Cancellation Endorsement

4. VEHICLE LIABILITY COVERAGEA. Required of all InsuredsB. Required Coverage:

Coverage must include all of the following:

- a. Non-Owned Auto Liability
- b. Hired Auto Liability
- c. Owned Auto Liability (If the Insured owns autos)

C. Required Limits:

\$1,000,000 per occurrence and \$2,000,000 general aggregate for bodily injury and property damage.

D. Required Endorsements:

1. Additional Insured Endorsement
2. Primary and Non-contributory Endorsement
3. Notice of Cancellation

5. PROFESSIONAL LIABILITY COVERAGE

A. Required of all Insureds that employ or retain professional staff (including, but not limited to, nurses, psychologists, health care professionals, accountants or attorneys) for SETA-funded operations.

B. Required Limits:

Not less than \$1,000,000 per occurrence

C. Required Endorsement:

1. Notice of Cancellation Endorsement

6. WORKERS' COMPENSATION

A. Must cover all employees and participants employed or enrolled under the grant who are currently eligible for coverage under existing workers' compensation laws and regulations. Where participants in a work activity are not covered under a state's workers' compensation law, they shall be provided with adequate accident medical insurance.

B. Required Endorsement:

1. Notice of Cancellation Endorsement

7. EMPLOYMENT PRACTICES LIABILITY

A. Required of all Insureds

B. Required Coverage:

Policy must include Third-Party Liability coverage  
This policy may be written on a "claims-made" basis

C. Required Limits:

Not less than \$1,000,000 per claim.

**D Required Endorsement:**

1. Notice of Cancellation Endorsement

**DEVIATIONS FROM REQUIREMENTS**

Any deviations from these requirements may be approved in advance by the Executive Director, or designee, provided that one or more of the following findings is made and documented in the contract file to which the deviation pertains:

- (1) The scope of work does not raise any risk that will be provided in certain coverages; or
- (2) The coverage or endorsement is not readily available in the marketplace.

**For additional information or assistance please contact:**

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