Part II – Cost Proposal
NEVADA READY! B-3
RFP # 2108

REQUEST FOR PROPOSAL: 2108

Submitted by:
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July 5, 2016

MASTER

WestEd
WestEd.org

Part II – Cost Proposal	
RFP Title:	Nevada Ready! B-3
RFP:	2108
Vendor Name:	WestEd
Address:	730 Harrison Street San Francisco, California 94107-1242
Opening Date:	July 5, 2016
Opening Time:	2:00 PM

ATTACHMENT H – COST SCHEDULE

Vendor: **WestEd**

Please provide your total costs for each or the projects requested in the RFP.

PROJECT I – PLANNING <u>$163,820.00</u> (includes all items listed below)

- ***1400 hours at $117.02/hour***
  - ***Employee salaries are based upon WestEd's fiscal year salary schedule as approved by the agency's board of directors. Salaries include the actual days worked for each employee. Salary rates are fully loaded rates. WestEd's minimum working days for one full-time employee (FTE) are 222 per year (1,776 hours per year). Benefits include worker's compensation, unemployment tax, and FICA for both employee classifications. Regular employees also receive retirement, medical/dental, life insurance, disability insurance, and other staff benefits.***
  - ***Staff travel***
    - ***Committee meeting***
  - ***Committee travel***
  - ***Materials and Shipping for committee meetings***
  - ***WestEd indirect***

PROJECT II – PILOT <u>$624,708.00</u> (includes all items listed below)

- ***5,176 hours at $120.70/hour***
  - ***Employee salaries are based upon WestEd's fiscal year salary schedule as approved by the agency's board of directors. Salaries include the actual days worked for each employee. Salary rates are fully loaded rates. WestEd's minimum working days for one full-time employee (FTE) are 222 per year (1,776 hours per year). Benefits include worker's compensation, unemployment tax, and FICA for both employee classifications. Regular employees also receive retirement, medical/dental, life insurance, disability insurance, and other staff benefits.***
  - ***Staff travel***
    - ***Committee meeting***
    - ***Stakeholder meetings and recruitment***
    - ***Pilot trainings***
    - ***Coaching and technical assistance***
    - ***Evaluation***
  - ***Committee travel***
  - ***Materials and shipping for committee meetings***
  - ***Materials and shipping for pilot***
  - ***WestEd indirect***

PROJECT III – PROFESSIONAL LEARNING <u>$204,460.00</u> (includes all items listed below)

- ***1,888 hours at $108.30/hour***
  - ***Employee salaries are based upon WestEd's fiscal year salary schedule as approved by the agency's board of directors. Salaries include the actual days worked for each employee. Salary rates are fully loaded rates. WestEd's minimum working days for one full-time employee (FTE) are 222 per year (1,776 hours per year). Benefits include worker's compensation, unemployment tax, and FICA for both employee classifications. Regular employees also receive retirement, medical/dental, life insurance, disability insurance, and other staff benefits.***
  - ***Staff travel***
    - ***Committee meeting***
    - ***B-3 trainings***
    - ***Evaluation***
  - ***Committee travel***
  - ***Materials and shipping for trainings***
  - ***WestEd indirect***

ATTACHMENT I – COST PROPOSAL CERTIFICATION OF COMPLIANCE WITH TERMS AND CONDITIONS OF RFP

I have read, understand and agree to comply with ***all*** the terms and conditions specified in this Request for Proposal.

YES **X** I agree to comply with the terms and conditions specified in this RFP.

NO _____ I do not agree to comply with the terms and conditions specified in this RFP.

If the exception and/or assumption require a change in the terms in any section of the RFP, the contract, or any incorporated documents, vendors ***must*** provide the specific language that is being proposed in the tables below. If vendors do not specify in detail any exceptions and/or assumptions at time of proposal submission, the State will not consider any additional exceptions and/or assumptions during negotiations. ***Note: Only cost exceptions and/or assumptions should be identified on this attachment. Do not restate the technical exceptions and/or assumptions on this attachment.***

WestEd
Company Name

Signature

Virgilio F. Tinio, Jr.
Print Name

6/28/16
Date

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

EXCEPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	EXCEPTION (Complete detail regarding exceptions must be identified)

ASSUMPTION SUMMARY FORM

ASSUMPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	ASSUMPTION (Complete detail regarding assumptions must be identified)

This document must be submitted in Tab III of vendor's cost proposal.
This form MUST NOT be included in the technical proposal.