#### CHAUTAUQUA COUNTY RESPONSE CHECKLIST

#### PROPOSAL NO. RFP-1-24 YB

#### PROPOSAL NO. RFP-2-24 YB

Please note below a list of documents which must be submitted in full as part of this proposal. Failure to submit any of the documents as part of your proposal or failure to acknowledge any addendum in writing with your proposal may be cause for rejection of the proposal. Submitting a proposal on any condition, limitation or provision not officially invited in this Request for Proposal (RFP) may also be cause for rejection.

#### Please check each item indicating your compliance:

THIS CHECKLIST MUST BE SUBMITTED AS PART OF YOUR PROPOSAL.

 RESPONSE CHECKLIST

 FUNDING PROGRAM NARRATIVE (The outline MUST be followed, and every subsection

 included in the narrative, in the order listed).

 OCFS 5001 INDIVIDUAL PROGRAM APPLICATION

\_\_\_\_\_ OCFS-5002 AGENCY PROGRAM PROFILE

 OCFS-5003 PROGRAM SUMMARY COMPONENTS

 PROGRAM BUDGET

 MEMBERSHIP FEE SCHEDULE

 ROSTER OF AGENCY’S VOLUNTEER BOARD (FOR NON-PROFIT AGENCIES ONLY)

 PERFORMANCE MEASUREMENT INSTRUMENT (TOOL USED TO MEASURE OUTCOMES)

 SAFETY PLAN(S)

 INSURANCE CERTIFICATES

 ONE (1) ORIGINAL AND ONE (1) COPY OF YOUR SUBMITTED PROPOSAL

|  |  |
| --- | --- |
| AGENCY: | TELEPHONE NUMBER: |
| ADDRESS: | E-MAIL ADDRESS: |
| AUTHORIZED REPRESENTATIVE (PRINT): | TITLE: |
| AUTHORIZED SIGNATURE: | DATE: |