



Lackawanna
County

Commissioners

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2020/2021 ARTS Engage! Request for Qualifications (RFQ)

RFQ 073-20-1150 APPLICATION

The County of Lackawanna
Department of Human Services,
Office of Youth and Family Services
DHS/OYFS
in partnership with
The Department of Arts and Culture

Release Date: March 13, 2020

Questions Submitted by:

Monday, March 23, 2020

Optional Informational Session:

Friday, March 27, 2020

9 am-10 am

at

**Electric City Trolley Museum
300 Cliff Street
Scranton, PA 18508**

RFQ 073-20-1150 Deadline:

2:00 pm Friday, April 17, 2020

Proposals must be submitted to the:

Board of Commissioners

c/o: Brian Jeffers, Chief of Staff

Lackawanna County Government Center

6th Floor

123 Wyoming Avenue

Scranton, Pennsylvania 18503

Contract Effective Date: July 1, 2020

Contract End Date: June 30, 2021

PROCEDURES FOR RESPONDING TO REQUEST FOR QUALIFICATIONS by

FRIDAY, April 17, 2020 by 2:00 p.m.

Two (2) copies of the proposal must be provided. Proposals must be submitted to the

Board of Commissioners c/o: Brian Jeffers, Chief of Staff
Lackawanna County Government Center 6th Floor
123 Wyoming Avenue
Scranton, Pennsylvania 18503.

Proposals must be submitted in a sealed envelope with the name of the firm submitting the proposal and the RFQ number clearly marked on the outside of the envelope. The County assumes no responsibility for delays in any form of carrier, mail, or delivery service causing the submission to be received after the above-referenced due date and time. Submissions by fax, telephone, or email is not permitted. The final selection will be made in the sole discretion of the Board.

The 2020-2021 ARTS Engage! Consortium RFQ Application is available in as a word .DOC or PDF format for your convenience. The four to six (4-6) page narrative may be submitted as a word document. Work samples are not required, but must be provided upon request. Please submit a legible application for the review panel to fully understand your request.

2020/2021 ARTS ENGAGE! Request for Qualifications (RFQ)

RFQ 073-19-1150 APPLICATION

APPLICANTS SHOULD NOTE THAT ANY AND ALL WORK INTENDED TO BE SUBCONTRACTED AS PART OF THE BID SUBMITTAL MUST BE ACCOMPANIED BY BACKGROUND MATERIALS AND REFERENCES FOR PROPOSED SUBCONTRACTORS(S) -- NO EXCEPTIONS



**2020/2021 ARTS Engage! Consortium RFQ 073-20-1150
Application**

Name of Coordinating Consortium Partner Date

Mailing Address City State Zip

Federal Tax ID # Phone Fax

Coordinating Partner Contact Title email Phone

Alternate Contact 1 AC 1 Title AC 1 email Phone

Alternate Contact 2 AC 2 Title AC 2 email Phone

Emergency Contact Title email Phone

Requested Amount Signature of Coordinating Consortium Partner



**RFQ 073-20-1150 Program Cover Sheet
must be completed for each program**

APPENDIX "A"

Coordinating Partner: _____

Program Title: _____

Program dates: _____

Days of the week: _____

Program times: _____ **Age Groups** _____

For Evaluation purpose:

Total Hours of Instruction: _____ hours Total Days of Instruction _____ Days

Check what discipline(s) this program is working in;

Performing Arts: Dance Dramatic Theater Music-choral/singing Music-learning an instrument
 Musical Theater Set Design Lighting/Sound Design Performance Art
(non-traditional performance)

Visual Arts: Drawing Mixed Media Painting Glassblowing Sculpture

Technology Based Arts: Graphic Arts Music-Sound Production/Recording Podcasting Social Media
 Video/Filmography

Miscellaneous: Building-(i.e.). Architecture, engineering) can be used for programs Cooking
 Writing Other: _____

Check the top three goals this program addresses for these children

- Social skills Positive peer association Positive school attitudes Thinking about the future
- Reduces social alienation Positive view of their artistic expression A safe haven
- Positive association with adults Improved self-esteem Interest in healthy activities
- Child's perception of parental interest

Name of Coordinating Consortium Partner

ARTS Engage! Funding Requested for 2020-2021	
Applicant Matching Funds for 2020-2021	
Total ARTS Engage! Program Costs	

INKIND

In-Kind Description	In-Kind Amount
In-Kind Total Cost	

Consortium RFQ 073-20-1150 - **Budget Administration Cost of Program**

APPENDIX "D"

Name of Coordinating Consortium Partner

ADMINISTRATIVE COST OF PROGRAM

Administration Costs Expenses	Administration ARTS Engage!	Administration Program Match	Administration Total
Administration Cost of Program Totals			

APPENDIX "D"

This Direct Cost Budget form must be completed for each individual program. One individual program per sheet.

Name of Coordinating Consortium Partner

Direct Program Costs

Program 1

Name of ARTS Engage! Program	
Age Group Served	
Maximum Number of Students	

Direct Program Expenses	Direct Program ARTS Engage!	Direct Program Match	Direct Program Totals
Direct Program Cost Totals			

This Direct Cost Budget form must be completed for each individual program. One individual program per sheet.

Name of Coordinating Consortium Partner

Direct Program Costs

Program 2

Name of ARTS Engage! Program	
Age Group Served	
Maximum Number of Students	

Direct Program Expenses	Direct Program ARTS Engage!	Direct Program Match	Direct Program Totals
Direct Program Cost Totals			

This Direct Cost Budget form must be completed for each individual program. One individual program per sheet.

Name of Coordinating Consortium Partner

Direct Program Costs

Program 3

Name of ARTS Engage! Program	
Age Group Served	
Maximum Number of Students	

Direct Program Expenses	Direct Program ARTS Engage!	Direct Program Match	Direct Program Totals
Direct Program Cost Totals			

Consortium RFQ 073-20-1150 – **Direct Program Costs Budget**

APPENDIX "E-4"

This Direct Cost Budget form must be completed for each individual program. One individual program per sheet.

Name of Coordinating Consortium Partner

Direct Program Costs

Program No. 4

Name of ARTS Engage! Program	
Age Group Served	
Maximum Number of Students	

Direct Program Expenses	Direct Program ARTS Engage!	Direct Program Match	Direct Program Totals
Direct Program Cost Totals			

Consortium RFQ 073-20-1150 – **Direct Program Costs Budget**

APPENDIX “D”

This Direct Cost Budget form must be completed for each individual program. One individual program per sheet.

Name of Coordinating Consortium Partner

Direct Program Costs

Program No. 5

Name of ARTS Engage! Program	
Age Group Served	
Maximum Number of Students	

Direct Program Expenses	Direct Program ARTS Engage!	Direct Program Match	Direct Program Totals
Direct Program Cost Totals			



**RFQ 073-20-1150 Program Cover Sheet
must be completed for each program**

APPENDIX "A"
additional cover sheet

Coordinating Partner: _____

Program Title: _____

Program dates: _____

Days of the week: _____

Program times: _____ **Age Groups** _____

For Evaluation purpose:

Total Hours of Instruction: _____ hours Total Days of Instruction _____ Days

Check what discipline(s) this program is working in;

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 Musical Theater Set Design Lighting/Sound Design Performance Art
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APPENDIX "A"
additional cover sheet