**SOUTHCENTRAL MISSISSIPPI WORKS**

**Minimum Threshold Certification**

The purpose of Minimum Threshold Certification is to collect information necessary to (1) determine whether a proposing agency qualifies as an eligible service provider and (2) rate the demonstrated effectiveness of the agency in providing the proposed services. Minimum Threshold Certification must be completed by the proposing agency for ***each*** proposal submitted, and ***must bear the original signature of the signatory official for that agency.***

Program Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project/Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MINIMUM THRESHOLD REQUIREMENTS**

To be considered, a proposal must meet all Minimum Threshold Requirements. **Proposals failing to meet any Minimum Threshold Requirement will not be considered.**

**Requirements for Qualification as an Eligible Service Provider**:

|  |
| --- |
| 1. To be eligible, the proposer must be qualified to do business in the State of Mississippi. SCMW prefers that service providers be incorporated; however, a service provider may be a sole proprietorship, a commission, or another type of organization when in the best interest of the project proposed.   **Required Information:** Indicate below the nature of the proposing entity (e.g., public, private for-profit, private nonprofit). Private entities should indicate the date and location of incorporation. |
|  |

|  |
| --- |
| 1. To be eligible, the proposing agency or its principals:   A. May not be debarred, suspended, declared ineligible, or voluntarily excluded from participation in procurement or non-procurement by any federal department or agency;  B. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;  C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated above;  D. Have not within a three-year period preceding this proposal had one or more public transactions terminated for cause or default.  **Required Information:** Provide a statement that certifies that the proposing organization adheres to all statements in this section. |
|  |
| 1. To be eligible, the proposer must have an established financial management system in place to ensure effective control of and accountability for WIOA funds and other assets. Documentation/receipts is required for ALL expenditures of WIOA funds.   **Required Information:** Provide a description of the proposer’s established financial management system. |
|  |
| 1. To be eligible, the agency shall not have any unresolved audit findings.   **Required Information:** To determine whether the proposing agency has any unresolved audit findings, the proposer **must** include as part of the proposal package the agency’s most recently completed audit. If the proposing agency is a newly-created entity, the proposal package **must** include all current (dated within two months of the proposal submission date) financial statements and a business plan. |
|  |
| 1. To be eligible, the agency or its principals shall not be convicted of any crime which indicates mismanagement or fraudulent use of funds by the agency, or insolvency or the agency.   **Required Information:** Provide a statement regarding any involvement of the proposing agency and/or its principals in criminal convictions and/or insolvency. |
|  |
| 1. To be eligible, the agency must have in place or must agree to establish certain policies and procedures (listed below).   **Required Information:** Indicate whether the proposing agency currently has or will establish the following policies and procedures. |
| For each item below, indicate whether you currently have or will establish:   1. Regular audit of all accounts by an independent auditor; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Maintenance of separate accounting records and documentation of expenditures for WIOA funds;   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Maintenance of a fidelity bond with minimum coverage of $100,000 or the highest amount of funds to be received during the contract period; bond must be executed prior to the granting of a subaward with the proposing organization.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Written Personnel policies;   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Written Grievance procedures for staff and participants;   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Written Payroll procedures and time sheets for staff and program participants;   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Maintenance of a WIOA property inventory system; and   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Written Travel policies 2. Workers’ Compensation coverage for any program participants to whom a wage will be paid by the proposing organization in connection with their program participation.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. CERTIFICATION STATEMENT   By signing below, I hereby certify that:   1. Costs have been determined independently, without consultation, communication, or agreement for the purpose of restricting competition, as to any matter relating to such costs with any other proposer or with any competition; 2. All costs are accurate, complete and current.   3. Unless otherwise required by law, the costs that have been quoted in the proposal have not been knowingly disclosed by the proposer, and will not knowingly be disclosed by the proposer, prior to award directly or indirectly to any other proposer or to any competition; and,  4. No attempt has been made by the proposer to induce any other person or firm to submit or not submit a proposal for the purpose of restricting competition.  5. I am legally responsible in the proposing organization for the decision as to the price and services being offered in the proposal and I have not participated, and will not participate, in any action contrary to the above items.  This certification statement is a material representation of fact. The signatory official, by signing and submitting this Minimum Threshold Certification, hereby attests that all statements contained herein are true and correct. The proposer agrees that submission of intentionally false or misleading information will result in the removal of this proposal from any consideration for funding. All information contained in this document is subject to verification.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Proposing Entity  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Certifying Official  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Certifying Official Date |