2801 S. University Ave., Little Rock, AR 72204-1099 | (O) 501.916.3144 | (F) 501.916.3425

UA Little Rock Technical Response Packet FB-25-012 Multimedia Rights Agreement

CAUTION TO SUPPLIER

Supplier's failure to submit required items and/or information as specified in the solicitation may result in disqualification.

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Solicitation Signature Page

PROSPECTIVE SUPPLIER INFORMATION	
Company Name:	
Contact Name: Title:	
Address:	
City:	
Phone Number: Fax Number:	
E-Mail Address: Business Designation	•
MINORITY BUSINESS STATUS	·
Check Certification Type: African American American Indian Certification#: Asian American Hispanic American Pacific Island American Woman Owned Asian American	
CONFIRMATION OF REDACTED COPY	
 YES, a redacted copy of the submission is enclosed. NO, a redacted copy of submission is <u>not</u> enclosed. I understand that, if requested, a full, non-redactive submission will be released. Note: If a redacted copy is not provided with the packet, and neither box is checked, a copy of the non-redactive documents, with the exception of financial data (other than pricing), shall be released in response to any made under the Arkansas Freedom of Information Act (FOIA). 	dacted
CERTIFICATION AND ACKNOWLEDGEMENT	
 By signing and submitting a response to this <i>Solicitation</i>, the Prospective Supplier acknowledges, and certifies that they do not boycott Israel and, if selected, will not do so during the aggregate to the contract. The Prospective Supplier acknowledges, agrees, and certifies that it is not currently engaged in a of the energy, fossil fuel, firearms and ammunition industries and agrees for the duration of this Agreement that it will not engage in a boycott of the energy, fossil fuel, firearms or ammunition industries. The Prospective Supplier agrees and certifies that they do not employ or contract with illegal immediate the Prospective Supplier certifies that they will not employ or contract with illegal immediating the aggregate term of a contract. The Prospective Supplier certifies that the government of the People's Republic of China ("PRC") of wholly own the bidder or hold a majority interest in the bidder. Bidder further certifies that the P not own or hold a majority interest in a for-profit parent company, subsidiary or affiliate of bidder subcontractor to be employed by bidder. An official authorized to bind the Prospective Supplier to a resultant contract must sign below. The signature signifies the that any exception in conflict with a solicitation requirement or a Solicitation Standard Term and Condition will disquisibmission. 	boycott sigrants. sigrants loes not RC does er, or in a agreement
Authorized Signature: Title: Use Ink Only.	
Printed/Typed Name: Date:	

Prospective Supplier Checklist

This checklist is provided to ensure all required information and documents are included in the submission packet. All documents must be completed in type or print. Illegible submissions may not be accepted. Recommended documents are not required but their submission is encouraged as they may be necessary for contract negotiations.

Required Submission Documents
☐ Completed Solicitation Signature Page
☐ Proposed Subcontractors Form, if applicable
☐ Recommended Options Form, if applicable
☐ Information for Evaluation
Experience (3 page limit)
☐ Solution (4 page limit)
Risk (3 page limit)
☐ Specification Sheets for all equipment proposed, please include product lead times
☐ Warranty and Installation schedule, if applicable
☐ Flash drive with a PDF copy of all submission documents
☐ Completed Pricing Response, sealed separately
Recommended Documents
Redacted copy of submission.
Additional terms, contracts, or user agreements
☐ Voluntary Products Accessibility Template <u>VPAT</u> , if technology related.
☐ Prospective Supplier's Equal Employment Opportunity Policy, if applicable.
☐ Bids over \$20,000 : Completed Contract Grant and Disclosure Form (EO 98-04).

Proposed Subcontractors Form

State of Arkansas Procurement Law requires that subcontractors to adhere to, and maintain all certifications, as the primary contractor. All subcontractor certifications must be submitted to the Office of Procurement Services within 30 days after award of the contract, and the contractor is required to maintain the certification on file for the remainder of the term of the contract.

Do not include additional information relating to subcontractors on this form or as an attachment to this form.

CONFIRMATION OF SUBCONTRACTOR USE		
 NO, I do not propose the use of a subcontractor to perform services. YES, I propose the use of the following subcontractors to provide services or goods. 		
SUBCONTRACTOR'S COMPANY NAME	STREET ADDRESS	CITY, STATE, ZIP

Recommended Options Form

Prospective respondents should identify optional recommended services available to the university, along with the schedule impact and cost details of each item. If the prospective respondent does not offer optional recommended services, prospective respondent should indicate so by checking the appropriate box. Responses to this form will not be scored for evaluation purposes.

Costs associated with the optional recommended services must be included on this form and must not be included in the completed Pricing Response.

Prospective supplier proposes the following optional recommended services under a resulting contract:

Ontion Dataile and Improsts	
Option Details and Impacts	
Item Description	
How will this add value?	
Schedule Impact:	
Cost Details:	
Item Description	
How will this add value?	
Schedule Impact:	
Cost Details:	
Item Description	
How will this add value?	
Schedule Impact:	
Cost Details:	
Item Description	
How will this add value?	
Schedule Impact:	
Cost Details:	
Item Description	
How will this add value?	
Schedule Impact:	
Cost Details:	
□ Prospective Contractor	r does not offer optional recommended services.

Contract and Grant Disclosure and Certification Form

Failure to complete all of the following information may result in a delay in obtaining, extending, amending, or renewing a contract, lease, purchase agreement or grant award with any State of Arkansas agency. This is for: ☐ Goods ☐ Services ☐ Both Taxpayer ID Name: First Name: MI: Last Name: Physical Address: City: ______ State: _____ Zip Code: _____ Country (if outside US): _____ Subcontractor: ☐ Yes ☐ No Subcontractor Name: **FOR INDIVIDUALS** Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee: What is the person(s) name and how Name of Job are they related to you? Position Held Mark (√) For How Long? [i.e., Jane Q. Public, spouse, John Q. [senator, Position Held Public, Jr., child, etc.] representative. name of board/ From Person's Tο Current Former commission, data Relation MM/YY MM/YY Name(s) entry, etc.] **General Assembly** Constitutional Officer State Board or **Commission Member** State Employee ☐ None of the above applies **FOR BUSINESSES** Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity. What is the person(s) name and how Name of Job are they related to you? **Position Held** Mark (√) For How Long? [i.e., Jane Q. Public, spouse, John Q. [senator, Position Held Public, Jr., child, etc.1 representative. name of board/ Person's From To Current Former commission, data Relation MM/YY MM/YY Name(s) entry, etc.] **General Assembly** Constitutional П Officer State Board or **Commission Member** П State Employee □ None of the above applies

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any supplier, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to UA Little Rock.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency, I agree as follows:

- 1. Before entering into any agreement with any subcontractor, before or after the contract date, I will require the subcontractor to complete a Contract and Grant Disclosure and Certification Form. Subcontractor shall mean any person or entity with whom I, the supplier, enter into an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with UA Little Rock.
- 2. I will include the following language in any agreement with a subcontractor: Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
- 3. No later than **10** standard business days after entering into any agreement with a subcontractor, whether before or after the contract date, I will mail a copy of the subcontractor's Contract and Grant Disclosure Certification Form and a statement containing the dollar amount of the subcontract to UA Little Rock.

Sunnlier Agreement

	Juppiner Agreement	
I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.		
Signature:	Title:	Date:
Supplier Contact Name:	Title:	Phone:
Office of Procurement Services Use Only		
Dept Name:	Contract #:	Grant #:
Dept Contact Name:	Email:	Phone:



Procurement Services

University of Arkansas at Little Rock

ROCK 2801 S. University Ave., Little Rock, AR 72204-1099 | (O) 501.916.3144 | (F) 501.916.3425

Information For Evaluation- Experience

Using this template, prospective respondents should provide the prospective respondent's experience and capabilities to meet the solicitation requirements. The information provided should be prioritized beginning with the most important and/or relevant experience listed first.

Prospective respondents may expand the space in each table, add a table, or delete a table as needed, but prospective respondents shall not exceed the three-page limit for this subsection. See the solicitation for more information about this subsection.

Prospective respondents shall not include the prospective respondent's name or any other identifiers, including without limitation names of staff members, projects, products, and addresses on the Information for Evaluation – Experience document.

Example:

Claim of Expertise:	We have a significant amount of experience in providing P-Card and T-Card services to State governments, and consistently delivery high performance.
Documented Performance:	We currently have 10 similar services, with an average rebate to the client of 5% and the average customer satisfaction rating on these services is currently a 9.8 out of 10.
Claim of Expertise:	
Documented Performance:	
	-
Claim of Expertise:	
Documented Performance:	
Claim of Expertise:	
Documented Performance:	

Information For Evaluation- Solution

Using this template, prospective respondents should include a narrative to address and provide a high-level overview of the solution and/or approach proposed using the requirements outlined in the solicitation.

Prospective respondents **shall not** exceed the four-page limit for this subsection. See the solicitation for more information about this subsection.

Prospective respondents shall not include the prospective respondent's name or any other identifiers, including without limitation names of staff members, projects, products, and addresses on the *Information for Evaluation - Solution* document.

Prospective respondents may delete the instructions above.

Revenue Generation and Partner Activation

- A. Describe your plans for developing new business and renewals.
- B. Describe your company's marketing/advertising/activation plan for Trojan Athletics and its sponsorship partners.

Transition Plan

- A. Provide a comprehensive strategy that outlines the approach and timeline for transitioning all services, assets, personnel, and knowledge from the incumbent supplier.
- B. Describe the methodology for ensuring all critical functions continue without interruption during the transition period.
- C. Specify the duration of the post-transition support and the criteria for successfully completing the transition.

Operations

- A. Please describe your company's management/operations plan for the operation of the program at UA Little Rock. This should include subsections, in the following order: Marketing, Publications, Social Media, Performance Reviews and Reporting, Personnel, and Rivalry Series.
 - a. For each of the above-listed subjections, describe your company's specific standards of excellence measurements, including specific competencies, parameters, and metrics for the objective measurement of operations, situations, and services.

Information For Evaluation- Risk

Using this template, prospective respondents should identify and prioritize major risks that they reasonably foresee could potentially prevent or impair the prospective respondent's delivery of the solution as offered in the proposal or to otherwise fail to meet the university's desired outcome, specifications, and performance standards, and how they will mitigate, manage, and/or minimize each risk listed.

Prospective respondents may expand the space in each table, add a table, or delete a table as needed, but prospective respondents **shall not** exceed the three-page limit for this subsection. See the solicitation for more information about this subsection.

Prospective respondents shall not include the prospective respondent's name or any other identifiers, including without limitation names of staff members, projects, products, and addresses on the *Information for Evaluation – Risk* document.

Prospective respondents may delete the instructions above and the example shown below.

Risk Example:

Risk Description:	Participating Entity does not understand how to use the Commercial Card Program.
Solution:	A full-time training group will hold education meetings at all Participating Entity locations twice a year throughout the length of the contract.
Documented Performance:	This risk mitigation has been used on the last 4 clients and has received a 10/10 satisfaction rating. These four clients have reported 0 complaints from their constituents regarding the usage of their commercial card program.
Risk Description:	
Solution:	
Documented Performance:	
Risk Description:	
Solution:	
Documented Performance:	