ATTACHMENT B: GRANTEE APPLICATION

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| **Contact Information** |
| **Lead Applicant Organization Name** | Click or tap here to enter text. |
| **Contact Name and Position** | Click or tap here to enter text. |
| **Street Address** | Click or tap here to enter text. |
| **City or Town** | Click or tap here to enter text. |
| **State** | Click or tap here to enter text. | **Zip Code** | Click or tap here to enter text. |
| **Contact Email** | Click or tap here to enter text. |
| **Contact Phone** | Click or tap here to enter text. |

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| **Supplier Diversity Office Certifications***Optional**(Please check all the apply)* | Does your company have any of the following certifications from Massachusetts’ [Supplier Diversity Office](https://www.mass.gov/certification-program-for-sdo): ☐ Minority Business Enterprise ☐ Women Business Enterprise ☐ Service-Disable Veteran Business Enterprise ☐ Veteran Business Enterprise ☐ Lesbian, Gay, Bisexual, and Transgender Business Enterprise ☐ Disability-Owned Business Enterprise |
| **Non-certified Diverse Business Enterprises** *Optional* | *Identify if you believe that your organization meets the criteria for any of the business enterprises above but has not completed certification with the Supplier Diversity Office:**Click or tap here to enter text.* |
| **Diversity, Equity, and Inclusion Mission or Vision Statement***Optional* | *Please include a brief summary of your organization’s diversity, equity, and inclusion mission or vision statement or a link to such a statement on your organization’s website. Please describe what your organization is proactively doing to promote diversity, equity, and inclusion and what steps you plan to take in the future.* Click or tap here to enter text. |

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| **Review of Attachment C: Sample Agreement** |
| **Has the Applicant reviewed Attachment D: Sample Agreement for Lead Technical Consultant? (Required)** |  ☐ Yes |
| **Are there any changes to this template contract agreement that would be necessary before the Applicant could sign the contract?** (Note: MassCEC has limited ability to change our contract terms.) |  ☐ No ☐ Yes. If so, please elaborate below and/or provide an annotated version of Attachment D with your application. Click or tap here to enter text. |

**Organization Description**

*Complete this section once for every organization that is part of the Applicant team.* ***If there are multiple organizations that are part of the Applicant team, please include the same for each organization that is part of the Applicant team****.*

**Organization Name and Description**

*Describe your organization’s history and mission. (150 word maximum)*

**Statement of Qualifications**

*Describe how the Applicant team meets all of the experience described in Section VIII (Selection Criteria). Please reference relevant past projects that Applicant team organizations (or individuals from those organizations) have worked on. Where applicable reference relevant certifications and credentials. As an attachment to this application, please include resumes of each individual who would be part of the project team. MassCEC suggests a limit of 200 words per topic area to encourage concision. Applicants may write more if they feel it is necessary to address the prompt. Please do not feel obligated to approach the suggested word limit.*

**How has your organization demonstrated experience with the following:**

1. **Developing and delivering audience-specific buildings education including building performance standards**
2. **Providing outreach and marketing**
3. **Buildings-specific Subject Matter Expertise**
4. **Developing, Implementing, Scaling Programs and Evaluating Program Impact**
5. **Diversity, Equity, and Inclusion (internal to organization and programmatically**

**Proposed Approach**

*The sections below are an opportunity to describe the Applicant’s proposed approach to each of the Tasks described in the RFP. Any additions to the scope should be described separately as additional Tasks. MassCEC suggests a limit of 200 words per topic area to encourage concision. Applicants may write more if they feel it is necessary to address the prompt. Please do not feel obligated to approach the suggested word limit.*

**Approach to Task 1**

*Please describe how the Applicant team would approach Task 1: Program Management and Reporting.*

**Approach to Task 2**

*Please describe how the Applicant team would approach Task 2: Early Assessment*

**Approach to Task 3**

*Please describe how the Applicant team would approach Task 3: Program Implementation Plan*

**Approach to Task 4**

*Please describe how the Applicant team would approach Task 4: Program Implementation*

**Approach to Task 5**

*Please describe how the Applicant team would approach Task 5: Program Scaling*

**Approach to Task 6**

*Please describe how the Applicant team would approach Task 6: Additional Tasks Within Initial Grant Period (if relevant*)

**Approach to Task 7**

*Please describe how the Applicant team would approach Task 7: Program Extension or Expansion*

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| **Key Performance Metrics***Provide proposed target numbers for key performance metrics outlined in Task 1: Program Management and Reporting.*  |
|  | **Year 1** | **Year 2** | **Year 3** | **Year 4** |
| **# of new program participants by target audience:** |  |  |  |  |
| **(Target audience 1)** |  |  |  |  |
| **(Target audience 2)** |  |  |  |  |
| **(Target audience 3)** |  |  |  |  |
| **# of total participants** |  |  |  |  |
| **# of virtual and in-person events** |  |  |  |  |
| **# of views and downloads of online resources** |  |  |  |  |
| **Percentage of participants from priority equity audiences** |  |  |  |  |

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| **References**  |
| *Include two references for the Applicant’s previous work. The references must include the name of the organization, contact person, a full address, email, and phone number, as well as a one sentence description of the Applicant’s work for the reference.* ***If there are multiple organizations that are part of the Applicant team, please copy this table for each organization that is part of the Applicant team****.*  |
| **Organization Name**  |   |
| **Reference 1:**  | Organization: ​Click or tap here to enter text.​ Contact Name: ​Click or tap here to enter text.​ Contact Title: ​Click or tap here to enter text.​ Contact Email: ​Click or tap here to enter text.​ Contact Phone Number: ​Click or tap here to enter text.​ Description of the Applicant’s work for the Reference: ​Click or tap here to enter text.​        |
| **Reference 2:**  | Organization: ​Click or tap here to enter text.​ Contact Name: ​Click or tap here to enter text.​ Contact Title: ​Click or tap here to enter text.​ Contact Email: ​Click or tap here to enter text.​ Contact Phone Number: ​Click or tap here to enter text.​ Description of the Applicant’s work for the Reference: ​Click or tap here to enter text.​   |

Please include the following attachments:

* Team Member Resumes: Include resumes of each individual who would be part of the project team.