SERVICE AND REIMBURSEMENT AGREEMENTS
FOR MBE/WBE TRAINING AND RELATED ASSISTANCE
UNDER 2-92-535

LAST UPDATED: February 10, 2020

By Order of the Chief Procurement Officer:

Signed: Shannon E. Andrews

Date: 14 February 2020

Effective: MAR 05 2020
The following rules pertain to the City of Chicago ("City") Department of Procurement Services' ("DPS") program for service and reimbursement agreements for training and related assistance to current and prospective MBEs and WBEs as set forth in Section 2-92-535(c) of the Municipal Code of Chicago ("MCC") (the "Program").

I. Program Eligibility

In order to be considered for the Program, the proposer must be an "Assist Agency" registered with DPS. Assist Agencies are associations of MBEs and WBEs, minority or community organizations, minority or women contractors’ groups, local, state, and federal minority or women business assistance offices, and other organizations that provide assistance in the recruitment and placement of MBEs or WBEs.

For more information regarding how to register as an Assist Agency, please send an email to dps.assistagency@cityofchicago.org.

II. Proposal Submission Process

An Assist Agency may submit a proposal to the Chief Procurement Officer ("CPO") detailing the training and related assistance it intends to provide to current or prospective MBEs and WBEs.

A proposal must include, at a minimum, the following information:

- A description of the Assist Agency and the services it offers;
- A detailed description of the proposed training or service to be offered to current or prospective MBEs and WBEs (the "Services");
- A description of the target audience;
- The goals and objectives of the Services;
- The anticipated outcomes of the Services, including how many MBEs and WBEs the Assist Agency intends to assist;
- An explanation regarding how the Assist Agency will track the success of its Services;
- An explanation regarding how the Assist Agency will market their Services and select current or prospective MBEs and WBEs to participate;
- A schedule for the Services;
- The Assist Agency’s detailed budget;
- A list of all individuals who will provide the Services with a brief biography summarizing their qualifications; and
- Any additional information requested by the CPO.

The CPO, in her sole discretion, determines whether the Assist Agency’s proposed program is acceptable. Registering as an Assist Agency does not guarantee approval of a proposal. A proposal template is attached hereto as Exhibit A for your reference. Proposals should be submitted via email to dps.assistagency@cityofchicago.org.
If the CPO approves the proposal, the Assist Agency may be required to enter into a service and reimbursement training agreement ("Training Agreement") with the City. Subject to the CPO's approval, the term of such agreement will be for the length of the training, but shall be no longer than for one calendar year. The maximum value of any Training Agreement shall not exceed $50,000, subject to availability of funds.

An Assist Agency may enter into no more than one Training Agreement per a calendar year. However, the CPO, her sole discretion, may make an exception if the Assist Agency can demonstrate that the additional agreement will not adversely affect the Services provided and that it has the resources and capabilities to provide such Services.

II. Reimbursement Process

Participating Assist Agencies will be reimbursed after the completion of the Services; provided, however, that the City may make one advance payment of no more than one-half of the value of the agreement prior to the performance of the Services. Such advance payment will be at the sole discretion of the CPO. If an advance payment is made, the Assist Agency must submit a half-way status report at the mid-point of the Training Agreement evidencing how such advanced payment was used.

To be eligible for reimbursement, the Assist Agency must submit a detailed report of the status and outcomes of the training and must provide evidence of actual costs incurred upon the completion of the Services. Such costs shall not include overhead or the cost of salaried employees that are incurred in the day-to-day operations of the Assist Agency. The CPO, in her sole discretion, determines whether the Assist Agency's reports are acceptable.

Subject to the maximum value of the Training Agreement, the CPO, in her sole discretion, determines the maximum reimbursement amount.
Exhibit A
Program Purpose
Provide the name of the organization and describe the training and assistance related to M/WBEs that the organization seeks to provide with the implementation of the proposed program. Provide any facts and statistics that support the need for the proposed training program. Per the rules, the program must provide training and/or support to either prospective or current M/WBE organizations.

Mission
Provide the mission statement of the organization.

Background
Provide background information on the organization with details on when the organization was started, and what factors influenced its development.

Program Description
Describe the program and goals in detail including but not limited to:

- how the program is structured
- how many training sessions will be held
- the length of time each session will be held
- on what days
- if there will be more than one group of sessions
- location of training
- anticipated dates
- training materials to be used
- instructors and facilitators (provide instructor bibliographies and qualifications)

Topics
Describe in detail each individual topic that will be covered as a part of the training course. Give an overview of what the participants will be introduced to in each session as part of the training course or related assistance.

Target Audience
Explain who the target audience is, and what requirements must be met for participation in the program. Explain how the M/WBE’s will be selected to participate in the program.

Goals and Objectives
Detail the individual goals of the program. How many participants are expected to be involved or complete the program? What do you expect to provide for the participants?
Example: The Assist Agency Certification program expects to recruit 12 businesses to participate in the 8 week program. We expect to provide each of the participants with a firm knowledge of the certification process, and a better understanding of how to obtain certification with the City of Chicago.

**Anticipated Outcomes**

Detail the expected percentages of participants who will meet the expectations and goals of the program and the expected percentage of participants who will complete the program.

Example: The Assist Agency Certification program expects to recruit 12 businesses to participate in the 8 week program. Of the 12 businesses, we expect that 10 businesses will be successful in the completion of all 8 weeks of the program. We further expect that of the 8 businesses that complete the program, all 8 will obtain M/WBE certification from the City of Chicago.

**Measurement and Evaluation**

How will you evaluate the impact of the training program? Surveys? Questionnaires? Other evaluation and performance tools? How often will you evaluate the program overall?

Example: The Assist Agency Certification Program will conduct pre-workshop and post-workshop surveys asking participants to evaluate their understanding of the topics presented during the course of the training program. Additionally, at the end of the training program, participants will be allowed to provide feedback on the overall program, and to make suggestions for topics that they wish to see provided in future workshops.

**Marketing Strategy**

Explain the marketing strategy and outreach plan to reach businesses that can benefit from the workshops, training and/or assistance that you plan to provide.

**Budget**

Provide a detailed plan on how the funds will be used. The budget may include but is not limited to items such as:

- materials & supplies
- marketing tools
- *instructor payments
- software purchases
- *facility rental

*Please note that DPS cannot reimburse for trainer or instructor salaries, nor can facility reimbursement be approved for facilities owned or leased by the agency which is providing the training.*
City of Chicago Department of Procurement Services  
Assist Agency Training Status Report

As part of Trainer's agreement with the City of Chicago to provide training and receive compensation therefor ("Agreement"), Trainer agreed to furnish the Training listed in the Agreement and described in Exhibit 1 thereto, subject to and in accordance with the terms and conditions of the Agreement. Trainer's satisfactory completion of this report and successful completion of the Training are required under the Compensation terms of the Agreement as a condition of payment.

Type of Report (check one): ______ (Halfway point) ______ (Final)

Name of Assist Agency providing training ("Trainer"): 

________________________________________________________
Representative overseeing all training:

________________________________________________________
Business Phone: ___________________ Cell Phone: _____________________
Fax Number: ______________________ Email: _________________________
Mailing Address: _____________________________________________

**Trainer must submit the following information and documents with this completed form:**

1. Summary of training agreed by Trainer to be provided ("Training");

2. Dates of Training;

3. Statement of objectives and goals as detailed in Trainer's proposal to the City and a detailed description of how Trainer has met or achieved those objectives and goals, and to what extent (this should include the names and contact information of the firms that Trainer has trained, the anticipated or actual outcomes of the Training provided with respect to each firm, and any other pertinent details, such as status of each firm's application or the reasons for failure to complete the Training); and

4. All invoices, proof of payments, and other relevant backup documentation detailing the expenditure of funds for conducting the Training.
Trainer Name (legal entity):

Authorized Signature:

Print Signatory Name:

Print Signatory Title:

Date:

Accepted by:

Chief Procurement Officer (or designee)

Date: