| Albany County, New York  |                              |                         |                      |                         |                                 |                      |
|--|------------------------------|-------------------------|----------------------|-------------------------|---------------------------------|----------------------|
| ARPA Workforce Development Grant   | Program                      |                         |                      |                         |                                 |                      |
| Scoring Rubric   | <u> </u>                     |                         |                      |                         |                                 |                      |
| Applicant Name: Practice 2 Pe  | rfect Tra                    | ining Cer               | iter, LLC            |                         |                                 |                      |
| <b>1. Applicant Capability and Experience</b>  |                              |                         |                      |                         |                                 |                      |
|  | <b>Excellent</b><br>4 Points | Good<br>3 Points        | Somewhat<br>2 Points | <b>Poor</b><br>1 Points | Not Inlcuded<br>0 Points        | Reviewer<br>Comments |
| <ul> <li>The organization demonstrates experience in providing the services they are requesting funding for to the identified target population</li> <li>The organization appears to have the organizational structure in place to sufficiently meet program and reporting requirements</li> </ul>   |                              |                         |                      |                         |                                 |                      |
| 2. Project Need  |                              |                         |                      |                         |                                 |                      |
|  | <b>Excellent</b><br>4 Points | <b>Good</b><br>3 Points | Somewhat<br>2 Points | <b>Poor</b><br>1 Points | Not Inlcuded<br>0 Points        | Reviewer<br>Comments |
| <ul> <li>Identifies Skill Gaps:</li> <li>Clearly outlines the nature of the workforce needs the project will address.</li> <li>Clearly explains why this need is not met currently by other means.</li> <li>Explains how the issue impacts the County.</li> <li>Explains how the need can be mitigated with short- to medium-term training.</li> <li>Scope of Skills Gap:</li> <li>Clearly identifies the magnitude of the skills gap. Is the issue limited to a single employer or does it effect multiple employers in an industry sector, a geographic region, the state, or the nation?</li> </ul> |                              |                         |                      |                         |                                 |                      |
| <b>3. Outside Funding / Financial Sustainabili</b>   | ty                           |                         |                      |                         |                                 |                      |
|  | Excellent<br>4 Points        | <b>Good</b><br>3 Points | Somewhat<br>2 Points | <b>Poor</b><br>1 Points | <b>Not Inlcuded</b><br>0 Points | Reviewer<br>Comments |
| <ul> <li>The proposal articulates a plan by which funded activities will have a sustained impact after The funding period ends</li> <li>The budget and financial narratives are clear, detailed, reasonable and The cost is a proportional investment related to project outcomes for The trainees, The employer(s), and The County</li> <li>Proposal includes a funding match or combines with multiple other sources of outside funding</li> </ul>   |                              |                         |                      |                         |                                 |                      |
| <b>4. Project Readiness / Ability to Meet Time</b>   | line                         |                         |                      |                         |                                 |                      |
|  | <b>Excellent</b><br>4 Points | <b>Good</b><br>3 Points | Somewhat<br>2 Points | <b>Poor</b><br>1 Points | Not Inlcuded<br>0 Points        | Reviewer<br>Comments |
| Proposal includes specific, measurable, attainable, relevant, time-based goals and the applicant provides strong evidence or shows capacity and/or successful history of working with targeted populations.  |                              |                         |                      |                         |                                 |                      |

| succession mistory of working with targeted populations.                         |                                   |                         |   |                      |                         |  |
|--|-----------------------------------|-------------------------|---|----------------------|-------------------------|--|
| 5. Project Impact  |                                   |                         |   |                      |                         |  |
|  | Excellent                         | Good                    | Somewhat  | Poor                 | Not Inlcuded            | Reviewer   |
|  | 4 Points                          | 3 Points                | 2 Points  | 1 Points             | 0 Points                | Comments   |
| -The plan for achieving the stated demand-driven outcomes is we                  | ell                               |                         |   |                      |                         |  |
| supported with examples and data.  |                                   |                         |   |                      |                         |  |
| -There is a plan for monitoring progress and achievements                        |                                   |                         |   |                      |                         |  |
| - Project include resources for long-term support                                |                                   |                         |   |                      |                         |  |
| - Narratives provide a deep insight of historical context and ident              | tify a                            |                         |   |                      |                         |  |
| negative impact realting to the COVID-19 pandemic                                |                                   |                         |   |                      |                         |  |
| <b>CONFLICT OF INTEREST ACKN</b>   | OWLEDGEMEN                        | T                       |   |                      |                         |  |
| I understand my role as a member of this [subcommittee name] r                   | proposal evaluation team and ack  | nowledge that I hav     | ve been informed of a                           | nd understand the co | ontent. requirements    | and expectations of the County's conflict of interest policy, particularly how it  |
| relates to the allocation of Federal funds under the American Res                | -                                 | -                       |   |                      | , <b>1</b>              |  |
| Please select one of the following two options:                                  |                                   | C                       | C   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
| OF INTEREST  |                                   |                         |   |                      |                         |  |
| I have no actual, potential or perceive<br>out my duties with the highest degree |                                   | o this procurement      | process and my role                             | as a member of the l | Economic Growth a       | nd Recovery Subcommittee proposal evaluation team and I undertake to carry         |
|  | <u>-</u>                          |                         |   |                      |                         |  |
| CONFLICT OF INTEREST   | - halow).                         | -                       |   |                      |                         |  |
| I have a conflict of interest (Select typ  | e below):                         |                         |   |                      |                         |  |
|  | Actual                            |                         |   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
|  | This is an existing of            | conflict of interest, f | for example: you have                           | a close relative who | is a director of one    | of the firms that has submitted a bid/proposal.                                    |
|  | Potential                         |                         |   |                      |                         |  |
|  | This is a conflict of             | interest that is about  | at to happen or could                           | happen, for example  | e: you or a close relat | tive is in the process of being hired by, or acquiring part or full ownership of a |
|  | firm that has submi               | tted a bid/proposal.    |   |                      |                         |  |
|  | Perceived                         |                         |   |                      |                         |  |
|  |                                   |                         | • • • •   | •                    | s compromising a po     | erson's objectivity, for example: you have a close personal friendship with a      |
|  |                                   |                         | omitted a bid/proposa                           |                      |                         |  |
| In the space provided below, please a  | describe the circumstances giving | g rise to the conflic   | t of interest:                                  |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
| Reviewer Name:   |                                   |                         |   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
| Deviewer Signatures  |                                   |                         |   |                      |                         |  |
| Reviewer Signature:  |                                   |                         |   |                      |                         |  |
|  |                                   |                         |   |                      |                         |  |
| Date of Review:  |                                   |                         |   |                      |                         |  |
|  | The Below Section H               | las Been Com            | pleted by the C                                 | ounty's Extern       |                         |  |
|  |                                   |                         | A 10  |                      | YES/NO                  | COMMENT  |
|  |                                   |                         | Application is Subs                             | · -                  |                         | No Financials  |
|  | mi                                |                         | Address a Negative                              |                      |                         |  |
|  |                                   | <u> </u>                | onds to the Identifie<br>ears to be an Eligible | <u> </u>             |                         |  |
|  |                                   |                         | Appears to Meet Co                              |                      |                         |  |
|  |                                   | J                       |   | v 1                  | - +5                    |  |