

**Certification of Intent to Participate
in a Competitive Application Process for the
for the California Community Colleges**

I hereby certify that the _____ Community College District, in support of _____ College as the proposed project administrator, intends to be an applicant in the competitive application process (i.e., Request for Application, "RFA") to select a fiscal agent for the California Community Colleges IEPI Specialized Training and Regional Workshops. Grant responsibilities will begin upon completion of the Request for Applications (RFA) and final award process, and would have an expected project duration of up to five (5) years.

Statement of Qualifications

1) Please attach a brief written summary (one page or less) of your district's administrative qualifications and experience in each of the following areas:

- Service as a fiscal agent and/or fiscal management of contracts or grants for a project of this scope (as described in the Letter of Interest) and for amounts up to \$20,000,000 per year.
- Management and payment of a high volume of subgrants or subcontracts.
- Rapid start up and implementation of a fiscal agent process.

2) Please describe your process for administering contracts and/or grants with multiple project stakeholders.

3) Please describe your District's board policy for entering into subgrant or subcontract agreements, including the district's competitive bidding rules and bidding threshold (for subgrants or subcontracts).

I understand that the RFA will be limited to the districts/colleges that certify this form with the required signatures and return it to the Chancellor's Office by no later than **5:00 PM on Monday, February 6, 2017**. I also understand that if only one qualified district/college submits this certification, that entity may be awarded the grant without any further competitive process.

The following District and College staff members must sign this form:

District/College Chief Executive Officer (signature)

Date

District/College Chief Executive Officer (printed)

District/College Chief Business Officer (signature)

Date

District/College Chief Business Officer (printed)

District Contact:

Name (printed)

Title

E-mail address

Phone Number

Return this form to:

CCC Chancellor's Office
Attn: Scott Valverde
Specialist, Institutional Effectiveness
1102 "Q" Street, 6th Floor
Sacramento, CA 95811-6539
svalverde@cccco.edu
(916) 327-5897

The original copy of the signed certification form and the Statement of Qualifications must be received by the Chancellor's Office by no later than 5:00pm on Monday, February 6, 2017.