







Year-Round 2022-2023 Work Based Learning Experience Worksite RFP

RFP's will be accepted until 5:00p.m. EST on Friday, October 14, 2022

and must be emailed to eblake@newhavenct.gov

Youth@Work is a public-private partnership of the City of New Haven and Workforce Alliance. Youth@Work provides temporary summer and year-round employment opportunities, workplace exposure and work readiness skills to youth ages 14-21 who face socio-economic barriers to workplace success.

Workplace experiences and services to youth are provided through an extensive network including the New Haven Public School system, local businesses, workforce development boards, community-based organizations, civic and faith groups, and Universities. While we facilitate the placement of youth into jobs, this is not an employment program, but a training experience for youth to learn basic work skills by exposure to various workplace settings.

Nonprofit organizations and public sector agencies submitting applications to be worksites should design a well-planned program that includes adequate and competent supervision of youth and activities that are in alignment with the goals of the Youth@Work program as outlined in the Required Program Elements.

Work-Based Learning – Required Program Elements

Work-based learning is the integration of the basic skills of reading, writing, speaking, mathematics and decision-making skills into work-related and assigned tasks. Worksite applicants should base work-based learning plans on the following, which are skills intended for student learning throughout the program:

☐ Basic Academic Skills – planned activities should include the use of reading, writing and math
☐ Thinking and Decision-making Skills — planned activities should require participants to think creatively, make decisions, solve problems
☐ Specific Occupation Skills – opportunities to learn technical skills necessary to perform a specific job
□ Personal and Interpersonal Skills – opportunities to demonstrate responsibility, integrity,
communication skills, teamwork and working with individuals from diverse cultures and backgrounds
□ Work Ethic/ Maturity – opportunities to be a participant in a "real life" work setting and being held accountable for all assigned tasks and outcomes
☐ Citizenship Skills – opportunities to learn about responsibilities as citizens of their community and
country

RFP Submission Requirements

- Organization must be New Haven based.
- Organization should be a non-profit entity.
- For profit organizations, will be required to do a match to salaries of youth placed.
- Insurance must meet the requirements of the City of New Haven (sample provided).
- Emailed submissions must carry the subject line of: (Agency Name) RFP submission, i.e., Youth@Work RFP.
- Programs should be expected to run from November 14, 2022 May 26, 2023.

RFP Withdrawal

RFP's may be withdrawn by written request to Erika Blake, Business/Program Manager at eblake@newhavenct.gov.

RFP Incompletion

RFP's will not be taken into consideration if received by the office incomplete. It is the responsibility of the applicant to review the requirements and submit all necessary documentation.

Insurance

- The agency shall carry liability insurance.
- The agency must be also carry coverage for sexual molestation. Your coverage amount can be the lowest your insurance carrier offers.
- Please review the sample attached. The insurance policy must meet the same requirements on the sample.
- Insurance policy must cover the dates of program.
- The City of new Haven must be listed as a certificate holder and additional insured.

NOTE: Programs that are of the City of New Haven Department (e.g., Police, Public Works, Health, NHBOE schools, etc.) are not required to submit a copy of COI. If you are a program that is NHBOE approved, a letter must be provided from the NHBOE stating they are accepting liability for your program.)

Questions, Inquiries, and/or requests for clarifications regarding this RFP should be directed to:

Youth@Work

Erika Blake, Business/Program Manager 165 Church Street New Haven, CT 06510 Tel: (203) 946-7582 Fax: (203) 946-5750

Email: eblake@newhavenct.gov

Year- Round 2022-2023 Work-Based Learning Experience Worksite Application Part I: Organizational Profile

Address:		Phone:	
FAX			
<u>NOTE:</u> (Primary contact will	be the person who receives com	munications from the office of Youth@Work)	
Primary Contact:			
Email Address:			
Please answer all of t	he following questions:		
point of contact	ct, and their contact information.	ve more than one location, please list each location	, the
Has your orga New Haven fu	· · · · · · · · · · · · · · · · · · ·	ne past two fiscal years) or currently receiving Cit	ty of
	Yes No If yes, an	swer the three (3) questions below:	
Amount	Source	Fiscal Year	
Amount	Source	Fiscal Year	
Amount	Source	Fiscal Year	
3. How many sta	ff persons does your organization	n employ?	
4. How many peo	ople did you serve in 2021/22?		
5. Are you willir \$	*	ries of placed youth, if yes, please indicate how m	uch.
6. Does your site	have a vaccination mandate?	Yes No	
• -	cipate and/or contribute to any neck all that apply)	of the following Youth and Recreation Department	nent
Black Histor	y Month Dinner Giveaway	Winter Wonderland/Friends of Rudolph	
Trunk or Treat/	Haunted RoadTurkey Drive	eYouth ConnectOther	

Part II: Year-Round 2022-2023 Proposal:

Name of pr	roposed program or service:		
Number of	youth (s) to be served by proposed	ed program:	
Total Nun	nber of Youth Workers Requesti	ing (Maximum 2)	
Please atta	ach narrative addressing the thre	ee (3) points listed below.	
<u>I.</u>	Youth@Work to expand the	on oject and describe how you will use staffing supported by a services available to youth populations in the City of New an to measure the success of your program.	
<u>II.</u>	Contingency Plan Explain how you will adjust	if awarded less than the full amount requested.	
<u>III.</u>	Job Description Describe the intended job describe will take away from the	description for proposed youth. Include in this description whis experience.	ıa
	1 0 0 11	along with narrative AND proof of liability insurance bree-ring binders, brochures, or photographs/artwork.	
I certify that the date see intentional	at the information provided in this et forth beside my signature on the	and print your name where indicated: s application and the attached documents is true and correct as his application. I also acknowledge my understanding that a of the information contained in this application or the attach ation.	ny
Person Con	mpleting Application	Executive Director	
Printed Na	me	Printed Name	
Date		Date	

