

**THE UNIVERSITY OF MISSISSIPPI
REQUEST FOR PROPOSALS
RFP# 513**

**Conduct Research and Develop and Deliver Training and Technical Assistance
for Child Nutrition Programs**

The University of Mississippi requests that individuals and/or companies interested in serving as consultants submit the information requested in this RFP to Conduct Research and Develop and Deliver Training and Technical Assistance for Child Nutrition Programs to the Institute of Child Nutrition (ICN) [formerly known as National Food Service Management Institute (NFSMI)]. **Materials should be submitted in duplicate to Ms. Rachel Bost, Director, Office of Procurement Services, 1 Jeanette Phillips Drive, P.O. Box 1848, University, MS 38677. Responses should be marked RFP #513 ICN on the outside of the envelope. Please do not submit the RFP directly to the Institute of Child Nutrition. The Office of Procurement Services will start accepting the RFP on December 7, 2013.**

STATEMENT OF NEED

The mission of the Institute of Child Nutrition (ICN) is to provide information and services that promote the continuous improvement of child nutrition programs. The Institute has four divisions that work together to accomplish this mission. Additionally, ICN often contracts with consultants who have an expertise in the successful operation of federally funded child nutrition programs. Contracting with consultants enables ICN to reach a wider range of child nutrition professionals.

ICN requests that individuals or companies interested in serving as a consultant submit the attached RFP.

Please indicate on page 3 your areas of expertise.

SCOPE OF WORK

The University of Mississippi/ICN is soliciting responses from individuals to develop a cadre of consultants who will be considered for specific ICN projects between January 1, 2014, and January 1, 2015. ICN reserves the option to renew this RFP for up to 60 months. Responses will continue to be accepted throughout the entire period of the RFP. Submission of a response does not guarantee consulting work or suggested rate of pay. The selected consultant will sign a separate agreement for each project. The work may involve interstate travel and overnight lodging.

The responses to the RFP must include:

- **resume describing education, training, job experience, certifications, and areas of expertise (see attached Checklist);**
- **hourly and/or daily rates of pay for services;**
- **list of past customers; and**
- **three references (including names, titles, mailing addresses, e-mail addresses, and phone numbers).**

PLEASE NOTE: All interested respondents must submit the attached Cover Sheet, Checklist, and a CV or resume to be considered. Anyone desiring more information may contact the Institute of Child Nutrition by calling 1-800-321-3054.

**REQUEST FOR PROPOSALS COVER SHEET
RFP #513**

Please complete the following COVER SHEET and CHECKLIST forms for your response to the RFP to be considered. Please include this page with your RFP.

Name: _____

This name must be the individual or company to whom the IRS income statement (1099) will be sent and must match the name to whom the checks will be made payable.

Address: _____

E-mail address: _____

Phone number: _____

Fax number: _____

PERS Certification: As an agency of the State of Mississippi, ICN is required to seek a determination from the Public Employees' Retirement System (PERS) of Mississippi before engaging the services of a PERS retiree to determining the individual's status as an employee vs. an independent contractor.

Consultant certifies that the following statement is true (please check one only):

____ I am not a member of the Public Employees' Retirement System (PERS) of Mississippi.

____ I am a member of the Public Employees' Retirement System (PERS) of Mississippi but have no immediate plans to retire.

____ I am a member of the Public Employees' Retirement System (PERS) of Mississippi and plan to retire on _____ (date).

____ I am a retiree under the Public Employees' Retirement System (PERS) of Mississippi as of _____ (date) and as such agree to work with ICN staff to complete the paperwork required by PERS.

Are you currently employed by any other State or Governmental Agency? Yes___ No___

If yes: Agency Name: _____

Percentage of time: _____

Are you currently being paid by any other grant funds? Yes___ No___

If yes: Agency Name: _____

Percentage of time: _____

All active ICN consultants may be listed in ICN publications.

REQUEST FOR PROPOSALS CHECKLIST

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Please check all areas of experience, education and expertise.

Services: Check only if documented experience.

- Audio-visual services
- Bilingual Specify.
- Content review
- Culinary training development
- Culinary training delivery
- Custom and on-demand printing services
- Grammar editing/proofreading
- Graphic design/formatting
- Group facilitation
- Instructional design
- Language translation

- Online training development
- Research
- Script writing
- Technical assistance consultant
- Training delivery
- Video development & production
- Web developer
- Webinar Facilitation
- Others

Please list

Experience: Check only actual positions held/experience

Child and Adult Care Food Program

- Adult Day Care
- Child Care Center
- Family Day Care Center
- Residential Child Care Institution
- Sponsoring Organization

- State Agency
- Summer Food Service
- Teaching
- Training Child Nutrition professionals

School Nutrition Programs

- Local School District
- State Agency
- Chef
- USDA

- Others

Please list

Credentials:

- Certified Chef Educator
- Certified Dietary Manager (CDM)
- Certified Professional – Food Safety (CP-FS)
- Certified Facilitator Specify.
- Certified Health Education Specialist (CHES)
- Child Development Associate (CDA)
- Culinary Certification Specify.

- Registered Dietitian (RD)
- Registered Environmental Health Specialist/Registered Sanitarian (REHS/RS)
- ServSafe Certified
- School Nutrition Specialist (SNS)
- Other

Please list

Education:

- Associate Degree
- Culinary School Graduate
- Baccalaureate Degree
- Master's Degree
- Doctoral Degree
- Others

Please list