

**Jackson Public School District
662 South President Street
Jackson, MS 39201**

Contact Information:

Project Administrator: Tiffany Jones, Manager, McKinney Vento Homeless Program

Telephone: 601-960-8885

E-mail: tifjones@jackson.k12.ms.us

Bid: 3263

**Title: Partners to provide Supplies for Scholars Experiencing
Homelessness**

Issue Date: Monday, July 15, 2024

Submission Deadline: Tuesday. August 13, 2024

Time: 10:00 a.m. (Central Standard Time)

**PLEASE SUBMIT ORIGINAL RFP DOCUMENTS IN THE FORMAT/DESIGN ISSUED ALONG WITH
OTHER SUPPORTING DOCUMENTS ATTACHED TO THE PROPOSAL, BY MAIL, HAND DELIVERY
OR BY UPLOADING TO www.centralbidding.com**

If you would like the tabulation for this RFP after Board Approval, please go to www.jackson.k12.ms.us.



The Board of Trustees of the Jackson Public School District (hereafter referred to as "JPSD") is soliciting sealed, written formal Requests for Proposals (RFP) from qualified vendors (hereafter referred to as "Vendor") for the purchase of furniture, equipment, supplies, materials, labor or services as outlined in the following specifications. Sealed RFP shall be received by JPSD, in the Business Office of the Jackson Public Schools, 662 South President Street, Jackson, Mississippi, until the time specified on the RFP Opening Schedule (front page of the formal RFP document), at which time all RFP shall be publicly opened and read aloud. Neither dating of the RFP form nor placing the RFP in the mail by this date shall meet legal requirements; the formal RFP document must be of the Jackson Public School District on or before the date and time stated.

JPSD reserves the right to reject any and all RFPs received and to waive any and all informalities. Vendors are encouraged to very carefully read all sections of this RFP document prior to submitting an RFP proposal. Any agreement generated due to an award, may be terminated by the District without cause upon one week's prior notice to vendor.



It is the basic philosophy of JPSD to extend to all responsible Vendors equal consideration and the assurance of unbiased judgment in determining whether their product or service meets specifications and the educational needs of the school district. JPSD shall fairly evaluate all formal RFP proposals submitted and base all sop.9.024 388.92 Tm0 g0 G(educ)5(c)32(at)31(i)-823(mk8 13.464)-5hB0(at)31(i)-s8()-34(n)25(e 1 72.024 442.68



terminate the purchase order or contract and to purchase similar supplies, services, or furniture and



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Gi dd'm	Ei Ubjlm
Kindermats	100
Character Backpacks	Girls – 150 Boys – 150
Composition Notebooks	2500



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HchU	100		



Addendum Number



Post Office Box 2338 - Jackson, Mississippi 39225-2338

Email form to mmays@jackson.k12.ms.us or todom@jackson.k12.ms.us | Fax to (601-960-8967

School/Department Requesting Vendor Addition _____

Please complete all sections below and include a current W-9 and Certificate of Insurance (if applicable):

Will your company accept purchase orders? Yes No

Yes No

: _____

Parent Company Name: _____ Doing Business As (DBA) Name: _____

Parent Company Tax #: _____ D/B/A Federal Tax ID/Social Security #: _____

Physical Address: _____ City _____ State _____ Zip-code _____

Remittance Contact:

Address: _____ City _____ State _____ Zip-code _____

Contact Person: _____ Phone: (____) _____

_____ 5

Contact Email Address _____

Fax: (____) _____ PO Email Address: _____

Minority Code:	Woman & Minority	Minority	Non-Minority	Woman
Type of Entity:	Individual/Sole Proprietor	Corporation	Partnership	Other

Submitted By: Signature _____ Date _____

IRS W-9 Form [Request for Taxpayer Identification Number and Certification](#)

Vendor Number: _____	1099: Yes No
Completed By: _____	Date: _____

Certificate of Liability Insurance for not less than \$1,000,000 as stated in Mississippi Code Section 31-7-139



Proposal Cover Page

VENDOR INFORMATION

Name and Title _____

Company Name _____ Date _____

SUBMISSION COVER SHEET AND CONFIGURATION SUMMARY

By my signature below, I hereby represent that I am authorized to and do bind the offeror to the provisions of the attached proposal. The undersigned offers and agrees to perform the specified personal and professional services in accordance with provisions set forth in the Request for Proposals. Furthermore, the undersigned fully understands and assures compliance with the Conditions of Solicitation and Standard Terms and Conditions contained in the RFP. The undersigned is fully aware of the evaluation criteria to be utilized in vendor selection for approval. I further certify that _____ is an authorized dealer in good standing of the products/services included in the proposal submitted in response to the RFP.

Authorized Signature

Date

Printed Signature



ASSURANCES AND SIGNATURE FORM

In submitting this application, I certify that:

1. The organization will comply with applicable federal, state, and local policies and procedures.
2. Services will be provided under the supervision of highly qualified teachers and/or administrators.
3. The organization will maintain professionalism and confidentiality.
4. The organization is fiscally sound and will be able to complete services to the local educational agency.
5. The organization will ensure that the services provided are aligned the Mississippi Curriculum Frameworks and scientifically research-based practices.
6. The organization will comply with applicable federal, state, and local health, safety, and civil rights laws.
7. Provisions that subject all individuals employed by or otherwise associated with the approved provider, including volunteers, support staff, etc., who have direct contact with students, to the



*For Educational/Instructional proposals

Subgrantee's/Contractor's Name	
Authorized Official's Name	
Complete Address	
Contact Number	
Are you currently registered to do business in the State of Mississippi? (Yes or No) If yes, attach supporting documentation of registration status. If, no please register and provide documentation of registration status. (GhUy/Ch Yf z bX fYeI JfYa Ybh)	



(Please print clearly or type)

***Appropriate signatures shall certify statements below.*

CONTRACTOR hereby certifies that at the execution of a contract with the Jackson Public School District (JPS) that the CONTRACTOR is not on the list for federal debarment on www.sam.gov – System for Award Management.

CONTRACTOR hereby certifies that at the execution of a contract with the Jackson Public School District (JPS) that the CONTRACTOR is not on the list for debarment on www.sos.ms.gov for doing business with the State of Mississippi or with any Mississippi State Agency.

CONTRACTOR hereby certify that all entities who are in partnership through this contract or grant with the Jackson Public School District (JPS) (subcontractors, subrecipients, et al.) are not on the federal debarment list on www.sam.gov – System for Award Management or the State of Mississippi debarment list. Proof of documentation of partnership verification with SAM shall be kept on file and the debarment status shall be checked prior to submission of every contract/subgrant and modification to JPS.



Item	Color	Size	Quantity	Total \$
T-shirts	Specific colors (red, blue, gold, burgundy, green)	Small Medium	100	



		16 Plus	50	
		18 Plus	50	
		20 Plus	50	
			Total for ladies' jeans	
Men's Shoes	Black, Blue (one pair of each color)	8	2	
		8.5	2	
		9	2	
		9.5	2	
		10	2	
		10.5	2	
		11	2	
		11.5	2	
		12	2	
			Total for men's shoes	



		Size 7	100	
		Size 8	100	
		Size 10	100	
		Size 12	100	
		Size 14	100	
		Size 16	100	
		Size 18	100	
			Total for girls' panties	
		Small	100	



