|  |
| --- |
| CONSULTANT INFORMATION |
| Bidder:  |        |

|  |
| --- |
| MINIMUM QUALIFICATIONS |
| Consultants who do not meet the minimum qualifications noted above will be rejected as non-responsive and will not receive further consideration. Any proposal that is rejected as non-responsive will not be evaluated or scored.*Please check all boxes that apply.*[ ]  Licensed to do business in the State of Washington. If not licensed, provide a written intent to become licensed in Washington within thirty (30) calendar days of being selected as the Apparently Successful Contractor.[ ]  Personnel with experience providing opioid/fentanyl substance abuse education to public schools. [ ]  Experience in providing effective, engaging, and culturally relevant professional development to adult learners at a school district, state, or national level.[ ]  Experience in convening heterogeneous groups of education professionals and families, and students to identify needs and growth opportunities.[ ]  Demonstrated ability to communicate clearly and accurately verbally and in writing, and manage multiple projects, while ensuring timelines are met and goals are achieved. [ ]  Experience in facilitating meetings and bringing varied groups to decision making.[ ]  Experience in developing substance abuse and prevention lessons/curriculum.[ ]  Experience with designing engaging, informational websites.[ ]  Demonstrated successful experience utilizing project management principles and coordinating a budget of at least $100,000 when successfully implementing complex projects for students/families, education leaders, or educators. |

*I certify under penalty of perjury of the laws of the State of Washington that the foregoing is true and correct.*

 \_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Bidder Date Place Signed (City, State)

 \_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name Title Organization Name