# COVER SHEET AND APPLICATION MATERIALS FOR TRANSLATION AND INTERPRETATION RFP

*Include the following information:*

**Name of the Proposal:**

**President/ED/CEO Name, Email, Phone:\*\***

**Proposing Agency Name (including DBA):**

**Proposal Contact(s), Email, Phone:\***

**Corporation Type:**

**Fiscal (Accounting) Contact, Email, Phone:**

**Year Incorporated:**

**Mission Statement:**

**Corporate Address:**

**Website Address:**

**Name of Board Chair:**

**Total Ready by Five Request:**

*\*This field must identify by name the contact person(s) to answer questions and negotiate subject to this RFP. You may include more than one person.*

*\*\*This field should include the person(s) authorized to sign a contract with the County on behalf of your organization.*

# SECTION THREE: APPLICATION MATERIALS FOR TRANSLATION AND INTERPRETATION RFP

*Please provide responses to all questions below. As a reminder, a full checklist of the application requirements for submission can be found in Section Four.*

*Answer all questions below. If an answer is not relevant for a proposed service, state the reason why.*

*As you respond, do not modify the format or order of this section.*

## I. Service Narrative.

1. Please indicate the type of service(s) your agency could provide:

Face-to-face (from English to another language or vice versa)

Over the Telephonic/Video Interpretation

Document translation (English to another language)

One-hour in-services for requesting agency staff to learn about cultural considerations as they serve families through translation services.

2. Executive Summary (Two pages maximum)

Within the summary include information about the agencies’ experience serving individuals and families in Kent County. Please speak to each interpretation method selected above in question 1.

3. Qualifications (One page maximum)

Provide a detailed list of all languages and dialects for which interpreters or translators are capable of providing. Provide a listing of any certifications or licensing which may apply to this proposal.

4. Project Staff (One page maximum)

Provide a brief description with responsibilities of each person as they relate to the service proposed here. Attach a chart with the staff who would provide oversight and interpretation services.

## II. Cost for Proposed Service(s)

1. Provide a pricing methodology with attention to detail that includes all associated costs to successfully provide services as described in your response. (Two pages maximum)

* Provide a cost per unit. (Unit is typically defined as an encounter or 15 minutes of time.)
* Include description of any premiums or discounts for specific languages.
* Include details about how the purchase of services by multiple programs through this contract could create cost savings.

*Ready by Five Early Childhood Millage funds will be paid once a service has been provided. The Unit Rate will be the rate at which the program will be reimbursed per unit of service by Ready by Five Early Childhood Millage funds.*

*Cost sharing is not a requirement for Interpretation and Translation services funded by the Ready by the Five Early Childhood Millage.*