

Proposal Cover Page

Applicant	
Proposed Regional Innovation Specialist Name	
Economic Development Region (List the region described in Section I.C.2 of the RFP in which the Applicant is seeking designation.)	
Authorized Organizational Representative (Person authorized to enter into Legal Agreements on behalf of the Applicant.)	Name: Title: Street: City State: NY Zip: E-mail: Phone: Fax:
Partners (Identify potential organizations with which the Applicant intends to partner to provide the services required by the RFP.)	
Proprietary Information (Indicate whether the Proposal contains any proprietary information.)	<input type="checkbox"/> No , this Proposal contains no proprietary information. <input type="checkbox"/> Yes , this Proposal contains proprietary information that is identified in accordance with Section II.D. of the RFP.

Proposal Checklist

Each of the following items is required unless otherwise noted. Failure to include any of these items in accordance with the guidelines provided in the RFP may result in the Proposal being rejected. A checkmark by each item indicates confirmation by the Authorized Organizational Representative that the appropriate sections of the RFP and Frequently Asked Questions Web Page have been reviewed and that the items in the Proposal are in conformance with the requirements and are included in both original Proposals and all copies.

- The Applicant's Proposal demonstrates that the Applicant has the ability to meet the matching funds requirements explained in Section I.D. of the RFP and the Applicant is aware that it must provide all matching funds demonstrated in its proposal in the ensuing contract.
- Two bound and tabbed copies of the Proposal including all required appendices are included in the submission.
- The hard copies of the Proposal include **all** required forms and appendices. No additional sections, appendices, or supporting documentation have been included. The Proposal is formatted according to the instructions in Section III of the RFP.
- An electronic copy of the Proposal including all forms and appendices will be submitted to rfpinfo@esd.ny.gov within 24 hours of the Proposal deadline.
- The Authorized Organizational Representative identified on the Proposal Cover Page has signed the Certification following this checklist.
- A Table of Contents prepared in accordance with Section III.B. of the RFP is included.
- An alphabetized "Glossary of Terms Used," as described in Section III.C. of the RFP, with a brief definition of each item, is included in the Proposal after the Table of Contents.
- A one-page non-proprietary Executive Summary prepared in accordance with Section III.D. of the RFP is included.
- A complete Proposal Narrative is included. The Proposal Narrative addresses all review criteria in Section IV. of the RFP and the additional requirements included in Section III.E. of the RFP. The narrative, excluding the table of contents, glossary, executive summary, required forms, and appendices, **does not exceed 7 pages**.
- Client Impact Letters are included as **Appendix 1** of the Applicant's Proposal.
- The Regional Innovation Specialist Resume is included as **Appendix 2** to the Proposal.
- Complet and mathematically accurate budget forms are included as **Appendix 3** to the Proposal.
- Completed Minority and Women-Owned Business Enterprise Forms are included as **Appendix 4** to the Proposal.
- If proprietary information is included in this Proposal, it has been identified in accordance with Section II.D. and a letter requesting FOIL exception is included as **Appendix 5** to the Proposal. The Applicant Institution has checked the appropriate box on the Proprietary Information line on the Proposal Cover Page.

Certification

The following certification must be made by the Authorized Organizational Representative designated on the Proposal Information Page.

I certify that each section and template required in the Request for Proposals is included in the originals and each copy of the Proposal submitted. I understand that failure to include any of the required items or failure to follow the format or use the templates provided in the RFP may result in this Proposal being rejected without review. I further certify that the Regional Innovation Specialist Program Frequently Asked Questions page of the ESD/NYSTAR Web site has been consistently checked, and this Proposal is in compliance with any pertinent information posted.

I certify that no New York State government funds other than those specified as eligible in the Request for Proposals are being used as Matching Funds in this Proposal.

I certify that the internal policies of the Applicant including, but not limited to, policies related to conflict of interest, collaboration with industry and/or not-for-profit organizations, confidentiality, and intellectual property are consistent with the goals of the Regional Innovation Specialist Program as outlined in the Request for Proposals and will not impede on the Applicant's ability to achieve the economic impacts described in this Proposal. Copies of the Applicant's policies and procedures will be maintained on site and made available for inspection by ESD/NYSTAR or its designee upon request.

Finally, I certify that the information provided in this Proposal is accurate and no misrepresentations have been made in any part of this submission. I further certify that the Applicant and any Partners have the ability to meet and, if a Regional Innovation Specialist Program designation is received, intend to provide the financial and/or administrative commitments outlined in the Proposal.

Signature of the Authorized Organizational Representative

(Signature)

(Date)