

College of Charleston

Bid Information

Bid Owner Mr. Niall Cahill Procurement Officer
Email cahillnp@cofc.edu
Phone 1 (843) 953-5940
Fax 1 (843) 953-5444

Bid Number 16.25.NC.P.T5
Title HR Learning Management System
Bid Type RFP
Issue Date 03/09/2016
Close Date 3/25/2016 2:00:00 PM Eastern

Contact Information

Address College of Charleston
160 Calhoun Street
Charleston, SC 29401

Contact Mr. Niall Cahill Procurement Officer
Department Office of Procurement
Building Lightsey Center
Floor/Room Suite B-53
Telephone 1 (843) 953-5940
Fax 1 (843) 953-5444
Email cahillnp@cofc.edu

Ship to Information

Address

Contact
Department
Building
Floor/Room
Telephone
Fax
Email

Supplier Information

Company Name _____
Contact Name _____
Address _____

Telephone _____
Fax _____
Email _____

Supplier Notes

By submitting your response, you certify that you are authorized to represent and bind your company.

Signature _____ Date ____ / ____ / ____

Bid Notes

Bid Activities

Date	Name	Description
3/14/2016 4:00:00 PM	Deadline for questions	The deadline for questions regarding this solicitation stands as indicated. All questions MUST be submitted in writing. E-mail (to cahillnp@cofc.edu) is an acceptable submittal method. Please refer to the "Scope of Solicitation" document under the "Attachments" Tab for instructions, terms and conditions regarding questions from Offerors.

Bid Messages

Bid Attachments

The following attachments are associated with this opportunity and will need to be retrieved separately

Line	Filename	Description
Header	SCOPE OF SOLICITATION - RFP Term Contract for Services- Rev 07.21.15.pdf	Contains Scope of Solicitation, General Instructions & General Terms/Conditions. For Special Instructions, Special Terms/Conditions, Specifications, Information for Offerors to Submit, Qualifications and Award Criteria, see separate document(s) under "Attachments" tab.
Header	Statement of Work for Learning Management System.pdf	Statement of Work for HR LMS

Header	System Registration.pdf	System registration
Header	IT Security Template Specs 11-21-14.pdf	IT Security form
Header	IT Technical specifications 11-21-14.pdf	IT Technical specification
Header	2013 W-9 Form & Instructions Blank.pdf	2013 W-9 Form for New Suppliers
Header	SC I-312 Non-Resident Taxpayer Registration 10.05.07 Affidavit.pdf	SC NON-RESIDENT Contractors must complete, sign and remit with Offer.
Header	Iran Divestment Act of 2014 Certification Form.pdf	ALL OFFERORS: Please review, sign and submit with Offer.

Bid Attributes

Please review the following and respond where necessary

#	Name	Note	Response
1	ACKNOWLEDGEMENT: TERMS & CONDITIONS	I have read, understand and accept all terms, conditions, information, specifications and attachments present under the "Attachments" and "Line Items" tabs.	_____ (Required)
2	ACKNOWLEDGEMENT: SC I-312 NON-RESIDENT TAXPAYER	I have read, completed, signed, and attached (under the "Response Attachments" Tab) the SC Non-Resident Taxpayer Registration Affidavit Form I-312, if applicable. Valid Responses: [Please Select], ATTACHED, NOT APPLICABLE	_____ (Required)
3	CERTIFICATION: IRAN DIVESTMENT ACT	I certify I am duly authorized to certify on behalf of my entity identified in this registration and, as of this date, I am NOT, nor is my entity, on the current Iran Divestment Act List. I further certify that I will notify the Procurement Officer immediately if, at any time, I am added, or my entity is added, to the Iran Divestment Act List. Information regarding this act may be found at www.procurement.sc.gov .	_____ (Required)
4	QUALIFICATIONS: YEARS IN BUSINESS	Enter the number of years your company has been in business performing work in similar size and scope to the requirements of this solicitation.	_____ (Required)
5	QUALIFICATIONS: PROFESSIONAL REFERENCES	Please provide references from at least THREE current customers for whom Offeror has provided substantially similar products and/or services in the fields below.	(No Response Required)
6	QUALIFICATIONS: PROFESSIONAL REFERENCES	Please provide references from at least THREE (3) customers for whom Offeror has provided substantially similar products and/or services. In your response please list at least THREE (3) organizations/institutions (preferred colleges but at least one college if possible) with addresses, HR and IT contacts and phone numbers that use the proposed solution. We would like to contact them for detailed reference checks. Please also indicate which of the schools use Ellucian Banner and integrate with your solution.	(No Response Required)

- 7 PROFESSIONAL REFERENCE 1 Please provide (1.) Organization Name (2.) Contact Name _____ (Required)
(3.) Current Telephone Numbers (4.) Current eMail
Addresses (5.) Types of Goods and/or Services Rendered
- 8 PROFESSIONAL REFERENCE 2 Please provide (1.) Organization Name (2.) Contact Name _____ (Required)
(3.) Current Telephone Numbers (4.) Current eMail
Addresses (5.) Types of Goods and/or Services Rendered
- 9 PROFESSIONAL REFERENCE 3 Please provide (1.) Organization Name (2.) Contact Name _____ (Required)
(3.) Current Telephone Numbers (4.) Current eMail
Addresses (5.) Types of Goods and/or Services Rendered
- 10 REPORTING: IS THE OFFEROR A SC CERTIFIED SMALL / MINORITY OWNED BUSINESS? Please answer Yes or No. To check eligibility, register or confirm status, please consult the SC Office of Small and Minority Business Assistance at www.govoepp.state.sc.us/osmba or 803.734.0657. Valid Responses: [Please Select], YES, NO _____ (Required)
- 11 IS THE OFFEROR A SMALL / MINORITY OWNED BUSINESS CERTIFIED BY ANOTHER GOVERNMENTAL ENTITY? Please answer Yes or No. Valid Responses: [Please Select], YES, NO _____ (Required)
- 12 REPORTING: IS THE OFFEROR AN OFFSHORE CONTRACTOR? Please answer Yes or No. Work that will be performed by an Offshore Contractor must be identified in the Offeror's response. For the purpose of this solicitation, offshore is defined as OUTSIDE the 50 States and US territories. Please note Offshore Contracting and/or Subcontracting is PROHIBITED for information technology procurements which involve contractor access to or possession of important College and/or State data. Valid Responses: [Please Select], YES, NO _____ (Required)
- 13 WILL ANY WORK UNDER THIS CONTRACT BE PERFORMED BY AN OFFSHORE BUSINESS AS A SUBCONTRACTOR? Please answer Yes or No. Valid Responses: [Please Select], YES, NO _____ (Required)
- 14 IF YES, WHAT TYPE OF WORK WILL BE CONTRACTED OFFSHORE AS RELATED TO THIS SOLICITATION? Please describe in detail. Enter "N/A" if not applicable. _____ (Optional)
- 15 WHAT PERCENTAGE OF THE TOTAL WORK WILL BE CONTRACTED OFFSHORE AS RELATED TO THIS SOLICITATION? Please enter as a percentage (%). Enter "N/A" if not applicable. _____ (Optional)
- 16 WHAT PERCENTAGE OF THE TOTAL CONTRACT VALUE WILL BE CONTRACTED OFFSHORE AS RELATED TO THIS SOLICITATION? Please enter as a percentage (%). Enter "N/A" if not applicable. _____ (Optional)
- 17 SERVICE LEVEL AGREEMENT FOR OFFSHORE CONTRACTING AND SUBCONTRACTING Provide a Service Level Agreement (SLA) detailing the arrangement between the Offeror and Offshore Subcontractor. Attach the SLA to your response under the "Response Attachments" Tab. Answers to these questions provided by the Offeror are for information only and will not be used in the evaluation and determination of an award. Valid Responses: [Please Select], ATTACHED, NOT APPLICABLE _____ (Optional)

