

Proposal Cover Sheet/Signature Page
Workforce Innovation and Opportunity Act (WIOA) – Youth Services Program

Workforce Investment Board | Butler ▪ Clermont ▪ Warren
406 Justice Dr, Suite 301
Lebanon, OH 45036

Respondent Name: _____
Street address: _____ P.O. Box: _____ City, State, Zip: _____ Phone: _____ Fax: _____
Person authorized to represent the bidder: Name: _____ Title: _____ Phone #: _____ E-mail address: _____
Total Funds Requested \$ _____ In-School Youth Funds Requested \$ _____, # of clients to be served _____ Out-of-school Youth Funds Requested \$ _____, # of clients to be served _____ Organization Status: Not-for-Profit _____ Corporation _____ Private For-Profit _____ School District _____ Unit of Government _____ Educational Service Center _____ Other _____
Tax, Tax exempt, or non-profit I.D. number : _____ In compliance with the RFP and subject to the conditions thereof, the undersigned offers to furnish the services requested and certifies he has read, understands, and agrees to all term, conditions, and requirements of this proposal and is authorized to contract on behalf of the firm named above. Typed/Printed Name: _____ Signature: _____ Date _____ Title: _____