

Instructions for Completing the Request for Procurement Action Form

1. Please complete and submit this form if none of the exceptions shown below in Item 2 applies and:
 - a. You are buying a good or general service (where advice is not part of scope) valued over the current **bid limit** (See this website for the current bid limit: <http://www.cde.ca.gov/fg/ac/co/bidthreshold2015.asp>); or
 - b. Each of the following is true:
 - i. You are buying professional service (where advice is part of the scope) and:
 - ii. The value of your purchase is more than \$25,000, and
 - iii. The District does not already have a contract for what you're buying; or
 - c. A purchase order has been sent to the vendor, but now should be modified; or
 - d. You want to make changes (including exercising an option) to a contract already in place.
2. No RFPA is required for any of the following "exceptions":
 - a. To amend a warehouse ("stock") contract, or
 - b. To adjust capacity among contract records in SAP, if the adjustment was previously approved by the Board.

Section I

Under "Brief Description of Request," very briefly describe either:

- a. The nature of goods or services being requested if this is a new request for goods or services,
- b. The way you would like to see the contract in question changed if you are requesting a contract amendment,
- c. The way you would like to see the purchase order in question changed if you are requesting a modification to a purchase order or
- d. The nature of your request if it is other than the options shown in Section II.

Section II

Please note that requests for Professional Development ("PD") using General Funds may require additional approval.

Section III

Indicate here under "Start Date" and "(New) End Date" either:

- a. The dates on which you would like your new contract to start and end if yours is a request for a new contract or
- b. The original start date and the requested new end date if yours is a request to change the contract term.

If you are not asking that the contract expiration date be changed, just put "N/A" in the "(New) End Date" field.

Enter total amount for new contracts. For amendments, only fill in an amount in the "Amount (Not to Exceed)" field if you want to increase or decrease the contract amount. Show the amount by which you want to decrease the contract value either with a minus sign (-) or words to the effect of "reduce by."

Section IV

Please answer the funding questions shown.

Section V

Please select the one Superintendent's goal with which your requested procurement action is most closely aligned.

Section VI

Please answer the question that asks, "Will vendor provide services/products on school campus?" Otherwise, you need only complete this section if:

- a. Yours is a new request for professional services (consulting services where the vendor gives advice—e.g., business consultant, accountant, professional development) and
- b. You would like to recommend one vendor, in particular, to provide the services.

Section VII

Please check the questions for which your response is "yes."

Section VIII

You can find a list of approvals required for certain purchases in the Procurement Manual posted here: <http://achieve.lausd.net/psd>. State-adopted textbooks, for example, require special approvals.

Section IX

Find the list of documents that should accompany your RFPA in the Procurement Manual posted here: <http://achieve.lausd.net/psd>.

Request for Procurement Action (RFPA)

PSD Use Only: Contract/RFP/IFB No: _____ Amendment No: _____

Please read the attached instructions and complete all information.

Section I: Client/Contract Sponsor
 School/Office: _____ Cost Center: _____ Local District: _____ Shopping Cart No.: _____ Date: _____
 Contact Person: _____ Title: _____ Telephone: _____
 Email Address: _____ Brief Description of Request: _____

<p>Section II: Action Requested:</p> <p><input type="checkbox"/> 1. New Request to Purchase Goods or Services</p> <p><input type="checkbox"/> 2. Amend (Modify) Contract [Contract # _____]</p> <p><input type="checkbox"/> 3. Exercise Renewal Option [Contract # _____]</p> <p><input type="checkbox"/> 4. Add Funds Only [P.O. #: _____]</p> <p>Example: fund an additional year of a multi-year contract</p> <p><input type="checkbox"/> 5. Other (Describe above.)</p>	<p>Section IV: Funding:</p> <p>Federally Funded? _____ No _____ Yes (If Yes, check if Title I used _____)</p> <p>General Funds? _____ No _____ Yes</p> <p>Bond-funded? _____ No _____ Yes</p>	<p>Section V: Superintendent's Goals Please select only one (1) of the five (5) Superintendent's Goals:</p> <p><input type="checkbox"/> 1. 100 Percent Graduation</p> <p><input type="checkbox"/> 2. Proficiency for All</p> <p><input type="checkbox"/> 3. 100 Percent Attendance</p> <p><input type="checkbox"/> 4. Parent and Community Engagement</p> <p><input type="checkbox"/> 5. School Safety</p>																		
<p>Section III: Contract Term and Value: Contract No. _____ (if requesting amendment)</p> <p>Start Date: _____ (New) End Date: _____ (Enter "N/A" if no change to end date.)</p> <p>Amount (Not to Exceed) \$ _____ (Enter amount of increase/decrease. If No-Cost or Time Extension, only enter "0".)</p>		<p>Section VII: Please check those that apply to your request. For more information, visit the Procurement Services Division website here: http://achieve.lausd.net/psd</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>Where the request is a new request to purchase goods or services, please check those that apply:</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(1) Is this a request for special education for nonpublic schools?</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(2) Does this request otherwise involve the LAUSD as local education agency?</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(3) Is this a request involving an approved state-mandated service provider or a contractor that is named in the grant?*</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(4) Is this a request for a single-sourced contract (i.e., without competition among contractors) for a reason other than those listed in #3 above?*</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(5) Is this for textbooks, other than State Adopted District approved?</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(6) Is this for lease of equipment, vehicles or other personal property?</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(7) Does the request involve contractor access to student or employee data?***</td> </tr> <tr> <td><input type="checkbox"/></td> <td>(8) Does the request increase the contract amount by more than 75% of original value?***</td> </tr> </table>	<input checked="" type="checkbox"/>	Where the request is a new request to purchase goods or services, please check those that apply:	<input type="checkbox"/>	(1) Is this a request for special education for nonpublic schools?	<input type="checkbox"/>	(2) Does this request otherwise involve the LAUSD as local education agency?	<input type="checkbox"/>	(3) Is this a request involving an approved state-mandated service provider or a contractor that is named in the grant?*	<input type="checkbox"/>	(4) Is this a request for a single-sourced contract (i.e., without competition among contractors) for a reason other than those listed in #3 above?*	<input type="checkbox"/>	(5) Is this for textbooks, other than State Adopted District approved?	<input type="checkbox"/>	(6) Is this for lease of equipment, vehicles or other personal property?	<input type="checkbox"/>	(7) Does the request involve contractor access to student or employee data?***	<input type="checkbox"/>	(8) Does the request increase the contract amount by more than 75% of original value?***
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Section VI: Suggested Vendor Information for Professional Services.

Vendor Name: _____ Contact Person: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Non-Profit? Yes No Public Agency? Yes No

Will vendor provide services/products on school campus? Yes No

Section VIII: SIGNATURES:

Principal/Branch/Division Head
 _____ Date: _____
 (Signature) (Print Name & Title)

Local District Supt./Sr. Staff :
 _____ Date: _____
 (Signature) (Print Name & Title)

Other Approval*:
 _____ Date: _____
 (Signature) (Print Name & Title)

Other Approval*:
 _____ Date: _____
 (Signature) (Print Name & Title)

***If this item is checked, a single-source justification memo must accompany the RFPA.**
**** If checked, Procurement will ensure that an appropriate data use agreement is effected.**
***** If checked, a "75% Rule" exception request must accompany the RFPA.**

Section IX: Attachments
 Please check the appropriate boxes to indicate which related request documents are attached:

1. Services Statement of Work or Product Specifications*

2. Payment Schedule or Vendor Quote*

3. Informal Request for Proposal Checklist (if professional services up to \$250,000.00)

4. Request for Approval Form (if professional services over \$250,000)

5. Request for After-the-fact Contract Form (where contract request is after the fact)

6. Single-source Justification Memo (where required)

*At least these attachments must accompany each new request for goods or services.

[Required for purchases of professional services]

To avoid misinterpretation, please use complete words—no acronyms, e.g., “PD” for “Professional Development,” “HPS” for “High Priority School”; no abbreviations, e.g., “Sch” for “School”; and no substitution of symbols in place of words, e.g., “&” for “and,” “@” for “at,” etc.

Further Explanations	
1	<i>Briefly describe the services the vendor will provide.</i>
2	<i>If the requested services have been provided in the past, what were the benefits gained? (for example: increase in graduation rates, decrease in student referrals and/or suspensions, etc.)</i>
3	<i>If the services will be provided to a school, indicate here:</i> <ul style="list-style-type: none"> <i>a. How the school was identified,</i> <i>b. How the staff and/or students who are to receive the services were, or will be, selected; and</i> <i>c. Either:</i> <ul style="list-style-type: none"> <i>i. The number of and type of staff who will benefit or</i> <i>ii. The number and grade-level of students who will benefit.</i>
4	<i>Why could this service not be provided by District staff?</i>
5	<i>If the services are for students, are the services to be provided before, during or after school?</i>