

## PROPOSAL APPENDIX FORMS

This document indicates the proposal requirements for the RFP which shall be submitted by the deadline set for submission of proposals. Offeror shall complete the appropriate proposal requirements, sign all appropriate forms, and attach (upload) the completed Appendixes to their HlePRO online RFP submission.

### **APPENDIX CHECKLIST**

THE FOLLOWING APPENDIXES IN THIS TABLE MUST BE COMPLETED AS PART OF THE RFP AND SHALL BE UPLOADED WITH THE OFFERORS HlePRO SUBMISSION.

<b>APPENDIX DESCRIPTION</b>	<b>APPENDIX</b>
Proposal Letter	Appendix A
Business Classification Certification Statement	Appendix B
Price Quotation Sheet	Appendix C
Executive Summary	Appendix D
Company History and Organization	Appendix E
Product Roadmap	Appendix F
Offeror Minimum Qualification Matrix	Appendix G
Technical and Data Capabilities	Appendix H
Key Features	Appendix I
Training and Support	Appendix J
Data Sharing Protections and Requirement Capabilities	Appendix K
Implementation Plan	Appendix L
References	Appendix M

The University is not responsible for any issues with the uploading of the Appendixes into HlePRO.

**APPENDIX A  
PROPOSAL LETTER  
UNIVERSITY OF HAWAII**

We propose to provide the Digital Badging/Micro-Credential solution named in the Request for Proposals (RFP) No. 25-2294 to Provide a Digital Badging/Miro-Credential Solution for University of Hawaii System, Honolulu, Hawaii.

It is understood that this proposal constitutes an offer.

It is understood and agreed that we have read the University of Hawaii's specifications described in the RFP and that this proposal is made in accordance with the provisions of such specifications. By signing this proposal, we guarantee and certify that all items included in this proposal meet or exceed any and all such specifications.

We agree, if awarded the contract, to deliver goods or services which meet or exceed the specifications.

Respectfully submitted,

\_\_\_\_\_  
Legal Name of Offeror

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature (original)      **(Typed Name)**

\_\_\_\_\_  
Title

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Fax No.

\_\_\_\_\_  
Social Security OR Federal Tax Payer ID No.

\_\_\_\_\_  
Email

\_\_\_\_\_  
Remittance Address (if different from street address)

\_\_\_\_\_  
Hawaii General Excise Tax License No.

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Location of Offeror's Plant

Offeror is:       Individual     Partnership     Corporation\*     Joint Venture

State of Incorporation:     Hawaii     Other:

Is Corporate Seal Available In Hawaii:     Yes\*\*     No

\*      Attach to this page evidence of authority of the above officer to submit an offer on behalf of the corporation, giving also, the names and addresses of the other officers.

\*\*      If yes, affix corporate seal

### APPENDIX B BUSINESS CLASSIFICATION CERTIFICATION STATEMENT

**CONTRACTORS: Please complete the information below.** Terms used are taken from the U.S. Small Business Administration (SBA) Rules and Regulations (<https://www.sba.gov/>) and the U.S. Code of Federal Regulations (CFR). The term “controlled” refers to the management and daily operation of the business concern.

The company identified below (check all that apply):

- 1. \_\_\_\_\_ **IS NOT** a small business concern as defined in the regulations  
**(If you checked here, STOP. GO TO CERTIFICATION BELOW.)**
- \_\_\_\_\_ **IS a small business concern**, defined as one that is independently owned and operated, is organized for profit, is not dominant in its field, meets the SBA size standard eligibility (see reverse side of this form for examples of size standards), is registered and has its status represented in the U.S. Government’s System for Award Management (SAM) database. See <http://www.sba.gov/content/what-sbas-definition-small-business-concern>.
- 2. \_\_\_\_\_ IS a **small disadvantaged business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more socially disadvantaged and economically disadvantaged persons who are U.S. citizens. See 13 CFR 124.105 for exceptions.
- 3. \_\_\_\_\_ IS a **women-owned small business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more women who are U.S. citizens. See 13 CFR 127.
- 4. \_\_\_\_\_ IS a **HUBZone small business concern** that meets the certification eligibility requirements set by the U.S. SBA. See 13 CFR 126.
- 5. \_\_\_\_\_ IS a **veteran-owned small business concern** of which at least at least 51% is unconditionally and directly owned by one or more veterans or service-disabled veterans. See 38 CFR 74.
- 6. \_\_\_\_\_ IS a **service-disabled veteran-owned small business concern** of which at least 51% is unconditionally and directly owned by one or more service-disabled veterans. In the case of any publicly owned business, not less than 51% of the stock of which is owned by one or more service-disabled veterans. The management and daily business operations of which are controlled by one or more service-disabled veterans, or in the case of a veteran with a permanent and severe disability, a spouse or permanent caregiver of such veteran. See 13 CFR 125.11 et al.

#### CERTIFICATION

I hereby certify the information supplied herein to be true and correct. (Any misrepresentation shall be subject to the provisions stated in item B on the next page.)

Company Name: \_\_\_\_\_

\_\_\_\_\_  
Signature of Company Officer

Company Address: \_\_\_\_\_

Print Name: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Type of Goods/Services: \_\_\_\_\_

North American Industry Classification System (NAICS) Code: \_\_\_\_\_

## APPENDIX B

A. A small business concern is one that is independently owned and operated, is organized for profit, is not dominant in its field, has a place of business in the U.S., and operates primarily within the U.S. or makes a significant contribution to the U.S. economy. Size standard eligibility is based on the average number of employees for the preceding 12 months or on sales volume averaged over a 3-year period. See 13 CFR 121.201 for size standards identified by NAICS codes. The size standards for a few industries are shown below and are subject to change at any time.

1. SPECIALTY TRADE CONTRACTORS – “Small” if average annual receipts for preceding 3 years do not exceed \$15 million.
2. CONSTRUCTION, GENERAL CONTRACTORS – “Small” if average annual receipts for preceding 3 years do not exceed \$36.5 million.
3. MANUFACTURING – “Small” if 500 employees or less, except for some specific products which will increase the complement of employees to 750 or 1,000.
4. TRANSPORTATION – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific services.

\$27.5 million – general freight trucking, local.

5. WHOLESALE TRADE, DURABLE AND NON-DURABLE GOODS – “Small” if 100 employees or less.
6. RETAIL TRADE – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific products.

\$7.5 million – hardware stores.

7. SERVICES – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific services:
  - a) \$27.5 million – computer systems design services, custom computer programming services  
\$20.5 million – security guards and patrol services
  - b) \$18 million – janitorial services
  - c) \$38.5 million – passenger car rental
  - d) \$32.5 million – office machinery and equipment rental & leasing
  - e) \$7.5 million – general automotive repair

Annual receipts of a concern which has been in business for less than 3 complete fiscal years means the total receipts for the period the concern has been in business divided by the number of weeks in business, multiplied by 52. See 13 CFR 121.104.

B. Notice. Under 15 U.S.C. 645(d), any person who misrepresents a firm’s status as a small business concern, a qualified HUBZone small business concern, a small business concern owned and controlled by socially and economically disadvantaged individuals, or a small business concern owned and controlled by women in order to obtain a contract to be awarded under the preference programs established pursuant to 15 U.S.C. sections 637(a), 637(d), 638, 644, or 657(a), shall:

1. Be punished by imposition of fine, imprisonment, or both;
2. Be subject to administrative remedies including suspension and debarment; and
3. Be ineligible for participation in a program conducted under the authority of the Small Business Investment Act of 1958.

**APPENDIX C  
UNIVERSITY OF HAWAII  
PRICE QUOTATION SHEET**

Complete the worksheet as follows.

1. Provide a price quote for the digital badging/micro-credentials solution based on the information provided in Appendices D through K, which shall include the following:
  - A. Licensing fees based on the user-type and number of users. Refer to ATTACHMENTS A, B and C to determine the number of licenses based on Headcount Enrollment, Faculty Count, Employee FTE. Licensing fees shall commence upon satisfactory implementation and acceptance of the digital badging/micro-credentials platform and shall be projected out for a FIVE (5) year term in accordance with the estimated implementation timeline in Section 2.9 and thereafter paid on a fixed, annual basis.
  - B. One (1) – time fees for implementation services (e.g., Configuration and Testing integrations, Partnership, Training and Support) that the Offeror is providing to the University. One (1) – time fees shall be assessed to the University in accordance with the estimated implementation timeline in Section 2.9.
  - C. All fees shall include hardware, software, maintenance, mobile application costs, man-hours, travel-related expenses, overhead, and all applicable fees and taxes.

2. All rows in the worksheet must be completed. If there are no costs associated for any item, a “N/A” designation shall be indicated and the Offeror is not to assess any cost for that line item.

Cost for License Fees. <b><u>ANNUAL FEES</u></b>							
No.	Description	Year 1: Headcount Enrollment, Faculty Count, Employee FTE.	Year 2: Headcount Enrollment, Faculty Count, Employee FTE.	Year 3: Headcount Enrollment, Faculty Count, Employee FTE.	Year 4: Headcount Enrollment, Faculty Count, Employee FTE.	Year 5: Headcount Enrollment, Faculty Count, Employee FTE.	Total
1.	License Fee						
	<b>Total Annual Fees</b>						
<b><u>ONE-TIME FEES</u></b>							
No.	Description	One-Time Fee					
1.	Implementation Services: A. System Configuration and Testing Integrations B. Partnership C. Training D. Support						
	<b>Total One-Time Fees</b>						
<b>TOTAL PRICE:</b>							

**APPENDIX D  
EXECUTIVE SUMMARY**

Provide an Executive Summary that includes a brief overview of Offeror's proposal summarizing the anticipated results, as well as an overview of the process that the Offeror intends to follow to achieve these results.

**APPENDIX E  
COMPANY HISTORY AND ORGANIZATION**

Provide information regarding Offeror's company history and organization in the following areas:

1. Provide company headquarters information.
2. Provide company ownership structure.
3. Provide the number of years in business.
4. Provide awards and merits.
5. Provide software evolution and direction.
6. Provide evidence of financial stability.
7. Provide previous experience implementing projects similar in scope.

## **APPENDIX F PRODUCT ROADMAP**

Provide Offeror's plan for future updates to the solution as they relate to the following questions:

1. Describe how items are prioritized on the product roadmap.
2. How often is the product roadmap updated.
3. How often is the product roadmap made publicly available and/or available to partnering institutions.

**APPENDIX G  
OFFEROR MINIMUM QUALIFICATION MATRIX**

<b>Offeror Company Name:</b>	
<b>1. Cybersecurity and Disaster Recovery Plans</b>	<b>Yes/No</b>
<b>Indicate “Yes” or “No” if the Offeror possesses the following qualifications, and furnish the corresponding documents:</b>	
SOC 2 certification (the University’s CISO can sign a Non-Disclosure Agreement)	
Privacy policy or statement, including FERPA compliance	
Security plans and practices	
DATA flow diagram	
Network architecture diagram	
Disaster recovery plan	
<b>2. Standards-Based Compliance</b>	
<b>Indicate “Yes” or “No” if the following certifications of the Offeror are verifiable through 1EdTech (available at 1edtech.org). If “No”, furnish an alternative certification with a detailed explanation of how the alternative certification is comparable to the certification through 1EdTech.</b>	
Open Badges v. 2.0 or v.3.0 Type: issuer, Displayer, Host	
Open Badges v: 2.1 or v.3.0 API Support Service Provider	

<b>3. Demonstrate Ability</b>  Indicate “Yes” or “No” if the Offeror possesses the following qualifications, and furnish the corresponding documents:	
Accessibility Conformance Report completed utilizing Voluntary Product Accessibility Template VPAT 2.3 and Web Content Accessibility Guidelines (WCAG 2.1). The accessibility evaluation submitted must correspond to the current version of the proposed SOLUTION.	
Comprehensive accessibility evaluation from an objective, independent third party verifying the claims made on the product Accessibility Conformance Report (VPAT 2.3), or equivalent, if an independent third party did not complete the Accessibility Conformance Report. OFFEROR may use a third-party accessibility evaluation service of their choice.	
<b>3. Accessibility</b>  Indicate “Yes” or “No” if the Offeror has the following documents, and furnish the corresponding documents:	
Accessibility Conformance Report	
Accessibility Evaluation	

## **APPENDIX H TECHNICAL AND DATA CAPABILITIES**

Provide details on how the Offeror's solution meets the technical and data requirements of the University as referred to in Section 2.5, and also address specific issues as follows:

1. Describe how the solution functions across various web browsers.
2. Describe how the solution runs natively and responsively across various device types (e.g., desktop, laptop, tablet, smartphone).
3. Describe the availability of a mobile application for the solution.
4. Describe any limitations or differences in functionality for digital badge display and sharing between the website and the mobile application.
5. Describe in detail the integration capabilities between the solution and Brightspace learning management system.
6. Describe how the solution integrates with the University's Non-Credit Student Information System, Modern Campus.
7. Describe how the solution integrates with the University's Student Information System, Ellucian-Banner.
8. Describe how the solution supports the University's SSO.
9. Describe how the solution supports Two-Factor MFA.
10. Indicate where the application is hosted and where the data is hosted.
11. Describe where the data is hosted.
12. Describe the server response time, uptime guarantees, and maintenance schedule.
13. Describe the storage capacity and storage management support.
14. Describe how the solution will handle virus-infected (e.g., malware) files.
15. Describe how virus-infected files will be identified and quarantined or remediated when uploaded to the solution.
16. List and describe any security breaches and incidents compromising confidential information during the last FIVE (5) years.

17. Indicate any content or solution areas that are restricted system administrator access.
18. Describe in detail the types of reporting and analytic capabilities of the solution.
19. Describe in detail the solution's web accessible content features.

## **APPENDIX I KEY FEATURES**

Provide details on how the Offeror's solution meets the key feature requirements of the University as referred to in Section 2.6, summarized as follows:

1. Badge Hosting and Issuing
2. Open Badges Standards
3. Digital Badge Issuer User Interface
4. Metadata
5. Digital Badge Earner Capabilities
6. FERPA Compliance

**APPENDIX J  
TRAINING AND SUPPORT**

Offeror shall provide details on training and support provided for the solution as referred to in Section 2.7.

1. Describe the training and support provided for badge issuers.
2. Describe the training and support provided for badge earners.
3. Describe ongoing technical support for badge issuers and badge earners.

**APPENDIX K**  
**DATA SHARING PROTECTIONS AND REQUIREMENTS CAPABILITIES**

Provide a data sharing protections plan that provides details on how the Offeror's solution meets the data sharing protections and requirements of the University as referred to in Section 2.8, and shall also address specific issues as follows:

1. Describe the transmission of data and network security based on the data flow diagram and network architecture diagram referenced in Section 2.9 and Appendix G.
2. Describe the Offeror's data confidentiality policies.
3. Describe the Offeror's application security such as software update, upgrades, and patch schedules.
4. Describe how the Offeror will fulfill the elements described in Section 2.8, Sub-item G, Data Security.
5. Describe the Offeror's policies and/or procedures around disclosures to third parties.
6. Describe the Offeror's policies and/or procedures around destruction of data.
7. Describe the Offeror's policies and/or procedures around data breaches and mandatory disclosures of PII, as evidenced by incident response and data breach procedures.

## **APPENDIX L IMPLEMENTATION PLAN**

Provide a detailed implementation plan based on the estimated implementation timeline in Section 2.9, which shall also address specific issues as follows:

1. Describe the technical assistance provided with managing system configuration, branding, and establishing integrations with the hosting service provider.
2. Describe the technical assistance provided with the solution's system configuration and organizational hierarchy.
3. Describe the support provided for testing the integration with the University's Student Information System, multi-factor authentication system.
4. Describe the technical assistance, documentation, and resources to support stake holder engagement.
5. Describe the resources provided for an ongoing partnership with the University throughout the term of the contract to respond to feedback and address technical and functional questions and concerns related to the solution, support, and product enhancements.
6. Describe the resources provided for ongoing technical support to digital badge issuers and Information Technology Services Help Desk managers.



**APPENDIX M  
REFERENCES**

Provide the information for THREE (3) references. Refer to Section 3.14 for further information.

**Reference 1**

Name of Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

FTE: \_\_\_\_\_ Cost: \_\_\_\_\_

Description of Services Provided:

**Reference 2**

Name of Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

FTE: \_\_\_\_\_ Cost: \_\_\_\_\_

Description of Services Provided:

**Reference 3**

Name of Institution: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

FTE: \_\_\_\_\_ Cost: \_\_\_\_\_

Description of Services Provided: