|  |
| --- |
| CONSULTANT INFORMATION |
| Bidder:  |  |

|  |
| --- |
| MINIMUM QUALIFICATIONS |
| *Please check all boxes that apply.*[ ]  Licensed to do business in the State of Washington. If not licensed, provide a written intent to become licensed in Washington within thirty (30) calendar days of being selected as the Apparently Successful Contractor.[ ]  Licensed to do business in the State of Washington. If not licensed, provide a written intent to become licensed in Washington within thirty (30) calendar days of being selected as the Apparent Successful Bidder.[ ]  At least five (5) years of experience developing training and resources for K-12 educators. [ ]  At least five (5) years of experience in designing and developing professional learning.[ ]  At least five (5) years of experience with Washington State Teacher and Principal Evaluation Program criteria and frameworks.[ ]  Experience designing online curriculum using backwards planning, universal design for learning, and dual language strategies.[ ]  A history of engaging expert practitioners to inform product development and feedback.[ ]  A history of ethical and legal data collection, especially with confidentiality of participants. |

Consultants who do not meet the minimum qualifications noted above will be rejected as non-responsive and will not receive further consideration. Any proposal that is rejected as non-responsive will not be evaluated or scored.

|  |
| --- |
| ADDITIONAL DESIRED QUALIFICATIONS |
| *Please check all boxes that apply.*[ ]  Experience in co-constructing learning experiences with families outside of school settings.[ ]  Knowledge of educational trends in Washington and the needs of Washington students, families, educators, and communities.[ ]  Ability to apply a DEI (Diversity, Equity, and Inclusion) lens in the development of professional learning. |

*I certify under penalty of perjury of the laws of the State of Washington that the foregoing is true and correct.*

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

 Signature of Bidder Date Place Signed (City, State)

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

 Printed Name Title Organization Name