

Office of Management and Budget Division of Purchasing

Non-Competitive Contract Request Form

Department	OSHN YES!	Department Contact	Bethany Olson
Contact Email	bethany.olson@louisvilleky.gov	Contact Phone	502.574.6884

Contract Type: check one	New	Amendment				
		Additional Funds	Time Extension	Scope		
Professional Service	/ √	Ĩ				
Sole Source (goods/services)						
	Start	End				
Requested Contract Dates (MM/DD/YYYY)	07/01/2022	06/30/2023				

VENDOR INFORMATION

Vendor Legal Name	University of	Louisville P	ublic	Health a	& Inform	ation	Sciences					
DBA								28. — — —				
Point of Contact	Trey Bauer	Trey Bauer				Email	trey.bauer@louisville.edu					
Street	300 E. Mark	et Street										
Suite/Floor/Apt							Phone	502.8	52.435	50		
City	Louisville						State	KY		Zip Code	40	202
Federal Tax ID#					SSN# (I	fsole	e propriet	or)				
Louisville Revenue C	ommission Acc	ount #										
Human Relations Commission Certified Vendors			<u>s</u>	Certified Minority Certified Woman Owned Business Owned business			Disabled Owned business					
Select if applicable	ipplicable											
FINANCIAL INFORM	IATION											
Not to Exceed Contr	ot to Exceed Contract Amount \$100			.000		(including reimbursement expenses, if applicat			cable)			
Fund Source:	General Fund	✓										
Federal Grant Fede			Fede	ral Gran	nting Age	ncy						
	Other	Describe:										
Account	Code String #] [6	10103	52130	1		1		
			per l	hour			per	day		per serv	/ice	

Doumant Data		pernour	per uuy	perservice
Payment Rate		per month	Other	
Payment Frequency		Monthly	Upon Cor	npletion / Delivery
rayment riequency	✓	Quarterly	Other	



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CONTRACT SCOPE and PURPOSE (Attach additional documentation if necessary)

Amendments: Describe the circumstances under which a time extension or scope change is needed.

New: Be specific about the work to be performed / product to be purchased including but not limited to: scope of work; description of service; work product created; why the service / product is necessary; and benefit to Louisville Metro Government.

The long-standing partnership between University of Louisville Center for Social Justice Youth Development Research (CSJYDR) led by Dr. Brown and Louisville Metro Office for Safe and Healthy Neighborhoods Youth Engagement Services is to increase professional development opportunities and supports for the youth development workforce in Louisville through the creation and implementation of the Social Justice Youth Development Certificate program. This contract was executed and administered by the Office of Resilience and Community Service/Office of Youth Development in FY21 and FY22. The SJYD Certificate Program is fully developed and will be launched in 2022. The SJYD certificate builds capacity for youth development professionals and organizations that work directly with Louisville's most vulnerable and marginalized youth to develop healing-centered and equitable approaches and policies. Social Justice Youth Development (SJYD) supports, opportunities, programs, and services focused on implementing social justice practices in all aspects of the lives of young people, including youth work. These approaches require transformative methods that ensure youth are at the center of all aspects of youth work. This training will be required of all staff of youth service agencies receiving funding from OSHN.

JUSTIFICATION FOR NON-COMPETITIVE GOOD/SERVICE (Attach additional documentation if necessary)

Provide justification including but not limited to: a description of the unique features that prohibit competition; research conducted to verify the vendor as the only known source (sole source); why the service (PSC) is not feasible to be provided by LMG staff or expertise does not exist; known compatibility, proprietary and/or timing issues.

Documentation attached.

AUTHORIZATIONS: Per KRS 45A.380, I have determined that competition is not feasible for the above described good / service and
there is a single source within a reasonable geographical area of the good / service to be procured; or the resulting contract is for the
services of a licensed pr atessional states and a stist, or other non-licensed professional service.

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Department Directo		Date
	Signaty Signaty Burns-Jones	
	Printed Name	
	DocuSigned by:	
Purchasing Director	BERNON DI HART	Date_ <u>9/28/2022</u> _
C-DS	Signature	
TN	Joel Neaveill	
7/16		