



Department of Purchasing & Contracting  
1300 Commerce Drive, 2<sup>nd</sup> Floor  
Decatur, Georgia 30030  
Fax: (404) 371-6243

**Date: July 9, 2019**

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## **Request for Quotation No. 19-3003696**

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DeKalb County, Georgia is requesting a quotation for the following:

### **Computer Training Services**

**I. Proposed Term:**

August 12, 2019 - June 30, 2019

**II. Attachments:**

- A. Scope of Work
- B. Sample Software Application Training Requested
- C. Quote Form- Computer Training Cost Schedule
- D. Reference Form and Reference Check Release Statement
- E. Bidder Affidavit
- F. Insurance Requirements

**III. Payment Terms:**

Net 30

**IV. Scope of Work:**

See Attachment A

**V. Federal Work Authorization Program:**

All qualifying contractors and subcontractors performing work with DeKalb County, Georgia must register and participate in the federal work authorization program to verify the work eligibility information of new employees. In order for a Quotation to be considered, it is mandatory that the Bidder Affidavit, Attachment F, be completed with bidder's proposal.

**VI. Due Date:**

**All questions are due to Sophia Thomas via email at [sdthomas@dekalbcountyga.gov](mailto:sdthomas@dekalbcountyga.gov) on or before 2:00 p.m. EST on Tuesday, July 16, 2019.**

**Additional Information/Addenda**

The County will issue responses to inquiries and any other corrections or amendments it deems necessary in written addenda issued prior to the due date. Bidders should not rely on any representations, statements or explanations other than those made in this RFQ or in any addendum to this RFQ. Where there appears to be a conflict between the RFQ and any addenda issued, the last addendum issued will prevail. It is the responsibility of the Bidder to ensure awareness of all addenda issued for this solicitation. Please acknowledge the addenda and submit to the DeKalb County Department of Purchasing and Contracting as requested. Bidders may contact the above listed contact person to verify the number of addenda prior to submission. Addenda issued for this RFQ will be posted on DeKalb County's website, <https://www.dekalbcountyga.gov/informalbids>. Bidder should regularly check the County's website for addenda.

**Quotes are due on or before 5:00 p.m. EST on Monday, July 22, 2019.** Bidder must complete and return the quote form, requested documentation, reference form, bidder affidavit, addenda and provide a copy of bidder's valid business license to DeKalb County by email to the attention of Sophia Thomas at [sdthomas@dekalbcountyga.gov](mailto:sdthomas@dekalbcountyga.gov) or the bidder will be deemed non-responsive.

**All quotes are to be provided on Attachment C, Quote Form.**

Thank you for your interest in doing business with DeKalb County.

Sincerely,

*Sophia Thomas*

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Sophia Thomas  
Procurement Technician  
Department of Purchasing and Contracting

*CH*

Attachments A, B, C, D, E, F and G

# ATTACHMENT A

## SCOPE OF WORK

### Human Resources Department Computer Training

#### I. SCOPE OF SERVICES

DeKalb County Government seeks a qualified organization to provide computer application training services for its employees. Microsoft (MS) is the County's standard computer software application (2013 or later) ran on MS Windows 10 Enterprise. The successful respondent(s) will consist of a team of Microsoft certified trainers or Microsoft Office User Master Trainers to facilitate the desired scheduled training.

#### II. GENERAL REQUIREMENTS/DESCRIPTION OF TASK

Computer Software Application Training will at a minimum consist of the following classroom instruction:

- **Microsoft Office:** Beginner/Introduction, intermediate and advanced level computer training in: *Word, Excel, PowerPoint, Outlook, Access, Project, Publisher, SharePoint, One Drive, One Note, Teams (formerly Skype for Business), Visio*
- **Refresher and customized targeted training applicable to all offered trainings, i.e., Excel-Formulas, Excel-Pivot Table, Microsoft Shortcuts/Tips for Managers/Executives, Microsoft Shortcuts/Tips, etc.**

*Other specialized training may be requested based on business needs, i.e., Adobe Acrobat, Illustrator, InDesign, Photoshop, and related applications upon request*

A sample of the desired computer software application training descriptions are attached (see Attachment B). Note the requested quote includes, but is not limited to, the desired course offerings listed or the expressed course descriptions.

#### III. REQUIREMENTS

The County reserves the right to make one or multiple awards.

- Each quote for courses offered by the qualified organization must include a per-participant cost and a per-class cost, both are inclusive of the participants guide printing and certificate costs.
- For courses billed on a per class basis, the County requires a minimum of 8 participants, unless otherwise approved by the County.

- Quotes should be submitted in the requested format (see Attachment C - Computer Training Cost Schedule).
- One or more samples of the instructor's guide should be submitted for format and content evaluation.
- Credentials for all qualified trainers should be included as an attachment to the quote. Credentials for trainers added after the agreement is established should be submitted prior to confirmation of the scheduled training date.
- All requested information must be included, otherwise, the response will not be considered.

#### **IV. OTHER**

The selected vendor(s) will:

- Provide on-site training at designated County locations. The current training sites have workstations for at least 14 students and one instructor. Audiences will consist of:
  - Combined countywide groups, or
  - Targeted groups (specific job class, departments or divisions with identified skill building goals)
- Partner with County HR to establish course objectives, descriptions and prerequisites
- Develop participant training guides for each course with sufficient details to serve as a reference and provide a hard or electronic copy to each attendee.

Sessions should range from 2 to 6 hours in length for one-day courses and sessions more than 8 hours in length are two-day courses.

Approximately 400 or more employees will participate in training opportunities each fiscal year (January - December). The types and levels of training in each software application will vary depending on employee needs and interests.

The County will evaluate vendor's curriculum to determine if it meets the targeted course objectives as described in this RFQ.

The County reserves the right to request that the selected responder provide supplemental training topics and information related to the scope of work as prescribed by the Director of the Department of Human Resources and Merit System (HRMS).

If the County cancels a course due to inclement weather or other extreme circumstances (natural disaster, fire, outages that impact operations, etc.), the course will be rescheduled on a mutually agreed upon date at no additional cost.

If the County cancels a course at least three (3) business days prior to the scheduled session, the vendor shall not charge the County.

If the vendor cancels a course, written notice should be provided to HRMS no later than three (3) business days prior to the scheduled session and should be rescheduled within two weeks of the initial scheduled date. In the event of an emergency cancellation, the vendor will make every effort to reschedule on a date convenient to the County.

Vendor(s) will ask each student to complete a County provided evaluation form after each course to be submitted to HRMS by the facilitator in a sealed envelope. If the average overall course rating is below average or course training hours commitment was not fully met and may have impacted the authorized course content, the County employee(s) reserve the right to take a course provided by the vendor as a refresher within six months upon course completion. The vendor will allow employees to re-take the course at no additional cost on a mutually agreed date provided space is available. This will not count against the number of targeted enrollees for the agreement period.

Once the training is underway, HRMS reserves the right to observe course instructors and recommend changes to curriculum, method of instruction, and vendor designated facilitator/trainer. If after a 60-day trial period the County determines that the vendor performance is not satisfactory, the County will meet with the vendor to review the concerns and issue a notice to cure. Vendor will be given 30 days to address the concerns and make the necessary performance adjustments. If the performance issue(s) have not been rectified to County's satisfaction (based on feedback provided by end-user evaluations and HRMS Director or designee observation/evaluation) after 30 days receiving the notice to cure, the County reserves the right to cancel the agreement with vendor.

In coordination with the vendor, HRMS will develop a training and project schedule. Upon HRMS and the vendor(s) receipt of a signed agreement, a project schedule will be developed within ten (10) business days and training will commence no later than 30 days, unless otherwise agreed in writing.

HRMS reserves the right to utilize all training materials independent of the organization for County training and resource needs, without expressed permission to copy from the vendor.

## **ATTACHMENT B**

### **SAMPLE SOFTWARE APPLICATION TRAINING REQUESTED**

#### **Word Level 1 – Editing & Formatting Documents**

Gain basic knowledge and navigation of Microsoft Word; learn to create, format, edit and save documents; work with text and paragraphs; insert and format tables; bullets, header/footer, styles, use symbols and graphics; and utilize proofreading features

#### **Word Level 2 – Styles, Templates & Mail Merges**

Learn a variety of intermediate formatting skills to create, modify and enhance complex documents and build efficiency in addition to mail merge, labels, and templates

#### **Word Level 3 – Creating & Managing Long Documents**

Enhance skills to manage lengthy documents, collaborate with others, and secure documents, as well as, create, manage, revise, track changes, table of contents, development, forms (fields) and distribute documents

#### **Word: Transition from Word 2010/2013 to 2016**

Designed for experienced Word users to identify and use new and enhanced features

#### **Publisher: Creating Newsletters & Publications**

Develop skills in creating and editing publications like newsletters and flyers to include modifying the layout and structure of a document, formatting text, working with graphics, and preparing a publication for distribution

#### **Excel Level 1 – Worksheets, Formulas & Formatting**

Create and edit basic worksheets and workbooks to build skills using short cuts to enhance spreadsheet use

#### **Excel Level 2 – Advanced Functions, Charts & PivotTables**

Use advanced formulas and various tools to analyze and organize data, present data as charts, and enhance the look and appeal of worksheets by adding graphical objects

#### **Excel Level 3 – Macros, Auditing, What-If Analysis & VLOOKUP**

Learn how to automate common tasks; apply advanced analysis techniques to more complex data sets; troubleshoot errors; collaborate on worksheets, and import/export data

## **SAMPLE SOFTWARE APPLICATION TRAINING REQUESTED (Cont'd)**

### **Excel Transition from Excel 2010 to 2013/2016**

Designed for experienced Excel users to identify and use new and enhanced features

### **Access Level 1 – Creating Databases**

Establish a foundational understanding of how to construct a database to perform day-to-day responsibilities and enhance business processes

### **Access Level 2 – Queries, Forms & Reports**

Designed for the learner seeking to improve skills in table customization, creating queries/reports, building forms, and sharing data with other applications

### **PowerPoint: Level 1 – Creating Presentations**

Explore ways to create a presentation including formatting; visual appeal; adding and modifying graphics; inserting tables and charts to present data in a structured format for final delivery

### **PowerPoint Level 2 – Working with Graphics & Animation**

Use features to transform and customize presentations into powerful means of communication creating dynamic and visually appealing presentations

### **Windows 10 Level 1**

Explore Windows 10 interface, identify different components, customize desktop, manage files and folders, use common tools and programs, etc.

### **Refresher Course Options**

The selected vendor(s) will teach refresher courses on Windows applications.

# ATTACHMENT C QUOTE FORM

## Computer Training Cost Schedule

<b>Organization:</b>				
<b>Physical Address:</b>				
<b>Mailing Address:</b>				
<b>Point of Contact:</b>				
<b>Best Contact Number:</b>				
<b>Submitted By:</b>				
<b>Date:</b>				
ITEM NO.	COURSE	HOURS PER COURSE	COST PER CLASS SESSION	COST PER PARTICIPANT
<b>MICROSOFT OFFICE</b>				
<b><u>Excel</u></b>				
<b>1.</b>	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
<b><u>Word</u></b>				
<b>2.</b>	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
<b><u>PowerPoint</u></b>				
<b>3.</b>	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____



ITEM NO.	COURSE	HOURS PER COURSE	COST PER CLASS SESSION	COST PER PARTICIPANT
4.	<b><u>Outlook</u></b>			
	Beginner	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Intermediate	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Advanced	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
5.	<b><u>Access</u></b>			
	Beginner	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Intermediate	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Advanced	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
6.	<b><u>Project</u></b>			
	Beginner	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Intermediate	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Advanced	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
7.	<b><u>Publisher</u></b>			
	Beginner	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Intermediate	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Advanced	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
8.	<b><u>SharePoint</u></b>			
	Beginner	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Intermediate	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	Advanced	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	

ITEM NO.	COURSE	HOURS PER COURSE	COST PER CLASS SESSION	COST PER PARTICIPANT
9.	<b><u>OneDrive</u></b>			
	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
10.	<b><u>OneNote</u></b>			
	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
11.	<b><u>Teams</u></b>			
	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
12.	<b><u>Visio</u></b>			
	<b>Beginner</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Intermediate</b>	1-Day Course	\$ _____	\$ _____
		2-Day Course	\$ _____	\$ _____
	<b>Advanced</b>	1-Day Course	\$ _____	\$ _____
2-Day Course		\$ _____	\$ _____	
<p><b>NOTE TO RESPONDER(S)</b>  <b>NOTE #1:</b> Each class session will have a minimum of 8 participants, unless otherwise approved by the County. The County reserves the right to request smaller group(s) to participate in training at the "Per Participant Rate."  <b>NOTE #2:</b> Each class will be 2 to 12 hours in length. 10 to 12-hours sessions will be a two-day commitment.</p>				

<b>REFRESHER/ CUSTOMIZED TARGETED COURSES</b>				
<b>ITEM NO.</b>	<b>COURSE</b>	<b># OF HOURS PER COURSE</b>	<b>COST PER CLASS</b>	<b>COST PER PARTICIPANT</b>
13.	Excel		\$	\$
14.	Word		\$	\$
15.	PowerPoint		\$	\$
16.	Outlook		\$	\$
17.	Access		\$	\$
18.	Project		\$	\$
19.	Publisher		\$	\$
20.	SharePoint		\$	\$
21.	OneDrive		\$	\$
22.	OneNote		\$	\$
23.	Teams		\$	\$
24.	Visio		\$	\$
25.	Microsoft Shortcuts/Tips		\$	\$
<b>VENDOR SUGGESTED COURSE(S)</b>				
<b>Suggested Course</b>			\$	\$
<b>Suggested Course</b>			\$	\$
<p><b>NOTE TO RESPONDER(S) (In addition to Notes 1 and 2 above.)</b>  <b>NOTE #3:</b> The Department of Human Resources and Merit System (HRMS) may request refresher or customized courses. Examples of courses are located within Attachment B.  <b>NOTE #4:</b> Other courses offered by your organization may be added for consideration for County inclusion in the vendor suggested course section.</p>				

## ATTACHMENT D

### REFERENCE CHECK AND RELEASE

List below at least three (3) references, including company name, contract period, contact name, email address, telephone numbers and project name of individuals who can verify your experience and ability to perform the type of services listed in the solicitation.

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		
Project Name			

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		
Project Name			

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		
Project Name			

### REFERENCE CHECK RELEASE STATEMENT

You are authorized to contact the references provided above for purposes of this RFQ.

Signed \_\_\_\_\_ Title \_\_\_\_\_

Company Name \_\_\_\_\_ Date \_\_\_\_\_

**ATTACHMENT E**

**CONTRACTOR AFFIDAVIT**

By executing this affidavit, the undersigned verifies its compliance with O.C.G.A. § 13-10-91, as amended, stating affirmatively that the Quoter submitting a quote, contractor, firm or corporation which is contracting with DEKALB COUNTY, GA, a political subdivision of the State of Georgia, has registered with and is participating in a federal work authorization program\* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603, in accordance with the applicability provisions and deadlines established in O.C.G.A. § 131091, as amended]. The affiant agrees to continue to use the federal work authorization program throughout the contract period.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the COUNTY, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 1310-91, as amended, on the Subcontractor Affidavit form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the COUNTY, within five (5) days from when the subcontractor(s) is retained to perform such service.

\_\_\_\_\_  
BY: Authorized Officer or Agent

\_\_\_\_\_  
Federal Work Authorization  
Enrollment Date

\_\_\_\_\_  
Title of Authorized Officer or Agent of Quoter

\_\_\_\_\_  
Identification Number

\_\_\_\_\_  
Printed Name of Authorized Officer or Agent

\_\_\_\_\_  
Company Name & Address (do not include a post office box)

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS THE

\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_

\_\_\_\_\_ Notary Public

My Commission Expires: \_\_\_\_\_

# ATTACHMENT F

## INSURANCE REQUIREMENTS

### IMPORTANT NOTICE

**IMPORTANT — PLEASE READ CAREFULLY & FOLLOW INSTRUCTIONS LISTED HEREIN**

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1. If the County sends to you notice of award on this quote, take this form to your insurance agent as this form contains requirements that may be non-standard in the insurance industry.
2. Instruct your insurance agent that the County's requirements are listed in Section III, and that you *must* comply with these requirements before you may proceed with the work.
3. Before the starting of any work, the successful contractor must furnish to DeKalb County certificates of insurance from companies doing business in Georgia and acceptable to the County as follows:
  1. Certificates must cover:
    - **Statutory Workers Compensation**
      - (1) Employer's liability insurance by accident, each accident \$1,000,000.
      - (2) Employer's liability insurance by disease, policy limit \$1,000,000.
      - (3) Employer's liability insurance by disease, each employee \$1,000,000.
    - **Business Auto Liability Insurance** with a minimum \$500,000 Combined Single Limit/Each Occurrence (Including operation of non-owned, owned, and hired automobiles).
    - **Commercial General Liability Insurance**
      - (1) Each Occurrence - \$1,000,000
      - (2) Fire Damage - \$250,000
      - (3) Medical Expense - \$10,000
      - (4) Personal & Advertising Injury - \$1,000,000
      - (5) General Aggregate - \$2,000,000
      - (6) Products & Completed Operations - \$1,500,000
      - (7) Contractual Liability where applicable
  2. DeKalb County, GA shall be named as Additional Insured under any General Liability, Business Auto and Umbrella Policies. Coverage shall apply as Primary and non-contributory with Waiver of Subrogation in favor of DeKalb County, Georgia. Such

additional insured coverage shall be endorsed to Contractor's policy by attachment of ISO Additional Insured Endorsement forms CG 20 10 10 01 (ongoing operations) and CG 20 37 10 01 (products completed operations), or form(s) providing equivalent coverage.

3. This insurance for the County as the additional insured shall be as broad as the coverage provided for the named-insured Contractor. It shall apply as primary insurance before any other insurance or self-insurance, including any deductible, non-contributory, and waiver of subrogation provided to the County as the additional insured.
4. Contractor agrees to waive all rights of subrogation and other rights of recovery against the County and its elected officials, officers, employees or agents, and shall cause each Subcontractor to waive all rights of subrogation for all coverages.
5. Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least sixty (60) days prior written notice to the County.
6. Contractor understands and agrees that the purchase of insurance in no way limits the liability of the Contractor.
7. The insurance carrier must have a minimum A.M. Best rating of not less than "A" (Excellent) with a Financial Size Category of VII or better.
8. Certificates to contain policy number, policy limits and policy expiration date of all policies issued in accordance with this contract.
9. Certificates to contain the location and operations to which the insurance applies.
10. Certificates to contain successful contractor's protective coverage for any subcontractor's operations. If this coverage is included in General Liability, please indicate on the Certificate of Insurance.
11. Certificates to contain successful contractor's contractual insurance coverage. If this coverage is included in the General Liability, please indicate this on the Certificate of Insurance.
12. The successful contractor shall be wholly responsible for securing certificates of insurance coverage as set forth above from all subcontractors who are engaged in this work.
13. Certificates shall be issued and delivered to the County and must identify the "Certificate Holder" as follows:

DeKalb County, Georgia Director of  
Purchasing and Contracting  
Maloof Administration Building 1300  
Commerce Drive, 2nd Floor Decatur, Georgia 30030