

2018 District Grant Completeness Checklist

| Project No: | Project Title: <i>SFEC Increased Diversion</i> | | |
|---|---|-----------------------|-----------------------|
| <p>To ensure the district grant application is complete, the following form is required to be completed. Failure to submit this form will result in the grant application being categorized as "incomplete". Only if you can answer Yes or Not Applicable to all the questions on the form is the grant application complete and ready for submission. This Checklist must be signed and dated by the authorized official submitting the application as the signature is an affirmative attestation in regard to the requirements set forth at Section 2. Miscellaneous Items on the 2018 District Grant Application Profile Form.</p> | | | |
| Description | Application Page # | Initials of Applicant | District Verification |
| WORKSHEETS | | | |
| Performance Measures Worksheet Total Diversion Estimated from Project is completed. See Exhibit 4. | 9 | JDO | |
| Budget Worksheet is completed, match is included to meet the requirements and worksheet is mathematically accurate. See Exhibit 6. | 10-11 | JDO | |
| FORMS | | | |
| 2018 Grant Application Profile Form. All items on the form are completed or marked not applicable. See Exhibit 5. | 1-6 | JDO | |
| District Subgrantee or Plan Implementation Budget Form. All items are completed and the form is mathematically accurate. See Exhibit 7. | 7-8 | JDO | |
| SUPPORTING DOCUMENTATION | | | |
| Match Commitment Documentation (District required match.) See Page 3. | 15 | JDO | |
| E-verify documentation, if the grant applicant is a business entity for federal employment reporting purposes. See Page 26. | 16 | JDO | |
| 1 Quote for each budget line item \$3,000.01 or over. See Page 12. | 12-13 | JDO | |
| 1 Formal Quote for each budget line item \$25,000.00 or over. See Page 12. | 12-13 | JDO | |
| Additional sheets, if needed, to report previous District Grants received in excess of lines on District Subgrantee or Plan Implementation Budget Form | N/A | JDO | |
| Additional sheets, if needed, to report more Personnel than lines allow on District Subgrantee or Plan Implementation Budget Form | N/A | JDO | |
| Other additional sheets, if needed, to report more Contractual Services, Supplies, Travel, or Other lines than allowed on the District Subgrantee or Plan Implementation Budget Form | N/A | JDO | |
| Any other document(s), the grant applicant believes are necessary to complete the grant application. <i>Recycled Paper</i> | 14 | JDO | |

2018 District Grant Completeness Checklist

| Description | Application Page # | Initials of Applicant | District Verification |
|---|--------------------|-----------------------|-----------------------|
| Information required for Projects totaling \$50,000.00 or more. | | | |
| A. Demonstrate technical feasibility by submitting: | | | |
| 1.) A preliminary project design; or | | | |
| 2.) Engineering plans and/or specifications for any facilities/equipment. | | | |
| B. Financial report including | | | |
| 1) A three (3) year business plan. For projects involving recycling and reuse technologies, the plan shall include a market analysis with information demonstrating that the applicant has secured the supply of and demand for the recovered material and recycled products necessary for sustained business activity. | | | |
| 2) A description of project financing, including projected revenue from the project. | | | |
| 3) A credit history. | | | |
| 4) Up to three (3) years previous financial statements or reports. | | | |
| CHECKLIST | | | |
| 2018 District Grant Application Checklist is present, signed and dated. | | | |
| MANDATORY GRANT TRAINING | | | |
| Grant applicant or representative attended training per sign-in sheet. | ██████ | ██████ | |
| GRANT APPLICATION PACKAGE | | | |
| Grant application package was received by 4:00 p.m. on April 9, 2018. Package was sealed and appropriately marked "Grant Application Enclosed". | ██████ | ██████ | |
| Grant application package contains one (1) original and two (2) copies signed and dated. | | | |
| Proof paper used for grant application submittal is 30% or more recycled content. | | | |
| District Grant Application Checklist is included in grant application package and is signed and dated by authorized official. | | | |

I certify that all information in this application is accurate and complete, and that I am authorized by my organization to submit this application.

Signed: 

Date: 4/9/18

Title: Director of Facilities Mgmt.

**West Central Missouri Solid Waste Management District - Region F
FY 2019 Grant Application Profile Form**

| | |
|--|---|
| Project No: | Project Title: SFCC Increased Diversion |
| 1. Executive Summary: (Include specific information about the project as well as how the project is Beneficial, who it benefits and the evaluation methods used to quantitatively and qualitatively measure success of the project. Answer within the space provided.) | |
| <p>State Fair Community College is seeking funding of additional containers to collect recyclable materials and divert them from the landfill waste stream.</p> | |
| <p>We are looking to fund fifty(50) containers from Clean River Recycling Solutions to replace the twelve(12) current containers we are utilizing.</p> | |
| <p>We currently collect indoors from six(6) of our thirteen(13) buildings on the main campus. We want to increase our collection points to forty(40) indoor locations and ten(10) exterior locations. The new collection locations will add to areas where students, faculty, and staff congregate so that we can maximize our collection opportunities.</p> | |
| <p>Currently our Custodial Operations Division is collecting from the current ten gallon containers on a daily basis when we are collecting trash. These containers are collecting commingled plastic and aluminum. Recycled materials are currently bagged in clear bags, while landfill trash is bagged in black bags allowing staff to easily sort the materials. We collect all recycled materials from the containers, old corrugated cardboard(OCC) from our custodial & maintenance operations, while collecting trash and haul it to our Physical Plant to be placed in separate containers from Waste Corporation of America(WCA) for recycling and landfill materials.</p> | |
| <p>The new containers will only be for collecting materials that we are diverting from the landfill. The containers we have selected from Clean River Recycling Solutions will have flexible tops and signage that will allow us to collect and sort our diverted materials. We plan to initially start with a commingled recycling only, which will be colored blue. This will get our patrons used to the new containers while we begin our education process.</p> | |
| <p>We are committed to working with the City of Sedalia to collect compost materials from our campus. The bins we have selected will come with the option to switch them over to begin collecting compostable materials as we begin the regional partnership with the city. This will allow us to initially add this option to cafeteria bins, then expand it to our gymnasium, conference center, and eventually all areas. We have students and staff with compostable materials in all corner of the campus including indoors and outdoors. This expansion also will come with a color code of green. We expect to rely heavily on our education component to get this portion of the diversion working smoothly.</p> | |
| <p>We plan to develop education spotlights for our staff and students to train them in the items we are diverting. We plan to utilize the bins themselves for clean signage and pictures. We will be providing messages on bulletins boards, electronic media, semi-annual training days with staff, clubs and campus organization visits, as well as developing a group of volunteers that will be present at strategic bin locations for periodic demonstrations. Our education piece will be developed in house with our marketing department in conjunction with recommendations from Clean River Recycling Solutions and WCA. This will be an important component to the success of the operation. We plan to develop surveys of the students and staff at the beginning and mid-point of the project in order to help gauge their knowledge of our project and utilization of the diversion.</p> | |
| <p>As a part of the educational component we plan to develop some competitions and events with our employee organizations, and student activities staff. This will help to solidify the increased diversion project as part of our culture here at the college.</p> | |

**West Central Missouri Solid Waste Management District - Region F
2018 Grant Application Profile Form**

| | |
|---|--|
| Project No: | Project Title: SFCC Increased Diversion |
| 1. Executive Summary (Continued) <p>We will be following the City of Sedalla's lead in color coding recycled materials in blue containers and labels, while compost materials will be highlighted with green color coding. This will be included in the educational information and allow for the public to easily identify the streams for materials.</p> <p>We have selected Clean River Recycling because of their commitment to providing products made from recycled materials, products that can be recycled at the end of their life, and their resources for recycling and diversion programs and education.</p> <p>We plan to reuse the twelve existing containers to add inside large classrooms in order for them to continue being used and add in-classroom collection points.</p> <p>Custodial Services will track daily the number of full bags of trash(black) and recycled(clear) at the implementation of the new bins. The log will also include a weekly status on the WCA bins for recycled materials prior to the day they pick them up. This log will be collected periodically by the Implementation Manager and provided to the Recording Manager for inclusion in our data.</p> <p>We also plan to disperse battery collection buckets for twenty locations on campus to collect used batteries from electronic devices and equipment. Custodial Services already does this internally, so it will be just a slight increase in staff time to collect the additional locations. These will be collected to paid to be shipped off for proper recycling of the materials.</p> <p>Regular trash collection bins will not be included in this project.</p> <p>The Facilities Management Department will oversee this project and the operations. The goal is to divert as much plastic bottles, aluminum cans and compostable materials from the landfill stream.</p> <p>We plan to implement this project within thirty days of receiving the award by ordering the materials and preparing our education messages.</p> <p>The Recording Manager will track the regular trash expenses of the college's roll-off trash containers and compare the tonnage results to the last two years of data.</p> <p>The recording manager will track the battery collections and regularly report to the Project Manager.</p> <p>The Project Manger will regularly review the data in order to establish an estimate of the materials diverted from the landfill based on historical data.</p> | |
| 2. Miscellaneous Items <p>A. By signing and dating below, the official authorized to sign for the grant applicant attests that all applicable federal, state and local permits, approvals, licenses or waivers necessary to implement the project are either not needed or have been obtained or applied for and will be obtained prior to award.</p> <p>B. By signing and dating below, the official authorized to sign for the grant applicant attests that this project is in compliance with local zoning ordinances.</p> | |

West Central Missouri Solid Waste Management District - Region F
2018 Grant Application Profile Form

| | |
|---|---------------------|
| 3. Physical Location of Project: State Fair Community College | |
| Address Line 1: | 3201 W. 16th Street |
| Address Line 2: | |
| City: | Sedalia |
| State: | Missouri |
| Zip Code: | 65301 |
| 4. Work Plan: Identify project task as task 1, task 2, etc. and provide an explanation of each. | |
| Task 1 Solicit bids for new bins | |
| Task 2 Open sealed bids and place order with selected vendor | |
| Task 3 Develop initial campus messages about the new bins and their locations along with information on the funding source. | |
| Task 4 Install new bins across the campus | |
| Task 5 Continue education components | |
| Task 6 Partner with City of Sedalia for compost materials | |
| Task 7 Education for compost materials | |
| Ongoing Tasks Regular documentation of the data collection noted in the Executive Summary, continuous development of education messages and events with staff and students. | |

**West Central Missouri Solid Waste Management District - Region F
2018 Grant Application Profile Form**

5. Key Personnel and Qualifications: Resumes may be attached or provide below a description of qualifications of key personnel assigned to the project especially the project manager.

Justin O'Neal, Director of Facilities Management - PROJECT MANAGER

He has seven years of project management experience ranging from multi-million dollar construction to small departmental operation changes. He has been at State Fair Community College for almost 3 years and has added recycling to the department's regular operations, increased education to staff and faculty on waste diversion and has cut costs with tonnage fees by starting recycling operations. He will directly develop the education pieces along with the Implementation Manager, the college Marketing Department, Clean River Recycling Solutions, WCA, and the City of Sedalia. He will oversee the Implementation Manager and Recording Manager and monitor the entire operation.

James Trujillo, Custodial Services Manager - IMPLEMENTATION MANAGER

He has worked at the college since 1989 and has been in management since 1996. He has overseen multiple vendor change-outs, chemical changeovers and regularly manages a staff of ten to twelve custodians on two separate shifts. He will oversee the bin installation, custodial staff education and assist the Project Manager with student and faculty education.

Patty Morrison, Operations Coordinator - RECORDING MANAGER

She will be the clearing house for all of the data produced with this project. She will input the purchase orders, requisitions, and develop all of the data into spreadsheets and files for periodic reporting. She will report to the Project Manager.

West Central Missouri Solid Waste Management District - Region F
2018 Grant Application Profile Form

7. Budget Detail Narrative: For Cost Categories having line items with cost of \$3,000.00 or more, provide a brief explanation of why the item is needed and the methodology used for estimating the cost.

We are asking for funding only for the bins to collect the materials and for the signage that is included with the bins from the vendor. The college will be utilizing our existing systems for collecting the materials and educating the patrons of the college on how to utilize the collection bins.



STATE OF MISSOURI
 MISSOURI DEPARTMENT OF NATURAL RESOURCES
 SOLID WASTE MANAGEMENT PROGRAM
DISTRICT SUBGRANTEE OR PLAN IMPLEMENTATION BUDGET FORM

| | | | | | |
|---|--|--|--|--|--|
| 1. DISTRICT IDENTIFICATION (A-T) F | | 2. PROJECT NUMBER | | 3. PROJECT NAME SFCC Increased Diversion | |
| 4. NAME OF APPLICANT State Fair Community College | | | | 5. TYPE OF ENTITY <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> PUBLIC ENTITY <input type="checkbox"/> BUSINESS | |
| 6. ADDRESS (STREET, CITY, STATE, ZIP, COUNTY) 3201 W. 16th St. Sedalia, MO 65301 | | | | 7. FEDERAL ID OR SOCIAL SECURITY NUMBER 430889768 | |
| PROJECT INFORMATION | | | | | |
| 8. PROJECT TYPE <input checked="" type="checkbox"/> WR <input type="checkbox"/> RE <input type="checkbox"/> CO <input type="checkbox"/> MD <input type="checkbox"/> EDU <input type="checkbox"/> PI | | | | | |
| 9. A. ESTIMATED TONNAGE DIVERTED 5 | | C. JOBS CREATED BY THIS PROJECT 0 | | 10. SPECIFIC WASTE (WHITE GOODS, OIL, YARD WASTE, TIRES, HOUSEHOLD HAZARDOUS WASTE, ELECTRONICS, ETC.) plastic bottles, aluminum cans, corrugated cardboard, alkaline batteries | |
| B. OTHER QUANTIFIABLE MEASURE 1000 patrons DESCRIBE: Education 1000 patrons on proper recycling | | D. JOBS RETAINED BY THIS PROJECT 0 | | | |
| 11. PROJECT DESCRIPTION (LENGTH 1,000 CHARACTERS OR LESS) Increase the number of collection points on the main campus from twelve location to fifty locations. Increase staff, faculty and student education to increase the utilization of the recycling and compost collection points. | | | | | |
| PERSONNEL INFORMATION | | | | | |
| 12. OFFICIAL AUTHORIZED TO SIGN FOR THE APPLICANT Justin O'Neal | | | 21. PROJECT MANAGER Justin O'Neal | | |
| 13. TITLE Director of Facilities Management | | | 22. TITLE Director of Facilities Management | | |
| 14. ADDRESS 3201 W. 16th St. | | | 23. ADDRESS 3201 W. 16th St. | | |
| 16. CITY Sedalia | | 18. STATE MO | 17. ZIP 65301 | 24. CITY Sedalia | |
| 18. STATE MO | | 20. ZIP 65301 | | 25. STATE MO | |
| 26. ZIP 65301 | | 16. TELEPHONE WITH AREA CODE (880) 588-7200 | | 27. TELEPHONE WITH AREA CODE (880) 588-7200 | |
| 18. FAX WITH AREA CODE | | 27. TELEPHONE WITH AREA CODE (880) 588-7200 | | 28. FAX WITH AREA CODE | |
| 20. EMAIL joneal8@sfccmo.edu | | | 28. EMAIL joneal8@sfccmo.edu | | |
| FINANCIAL INFORMATION | | | | | |
| 30. AMOUNT AWARDED BY DISTRICT \$34,788.02 | | | 32. PROJECT START DATE | | |
| 31. AMOUNT OF DISTRICT MATCH TO BE PROVIDED BY APPLICANT \$6,140.48 | | | 33. PROJECT END DATE | | |
| PROJECT HISTORY | | | | | |
| 34. PROJECT NUMBER n/a | | 35. FUNDS AWARDED (\$) | | 37. CARRYOVER | |
| | | | | | |
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Use the following worksheet to help you develop your estimate for the waste diversion to be reported for the life of the grant project. Once the project is fully operational, twelve full months of diversion reporting is required and you may be reporting diversion for a partial month(s).

| Type of Waste Diverted | Total Tonnage for Life of Grant Project | Type of Waste Diverted | Total Tonnage for Life of Grant Project | Type of Waste Diverted | Total Tonnage for Life of Grant Project | Type of Waste Diverted | Total Tonnage for Life of Grant Project |
|------------------------|---|------------------------|---|-----------------------------------|---|---|---|
| Cardboard | 4 tons | Other Paper | | Clear Glass | | Other Glass | |
| Newspaper | | | | Brown Glass | | | |
| Magazines | | | | Green Glass | | | |
| Office Paper | | | | Fluorescent Bulbs/Tubes | | | |
| Mixed Paper | | | | | | | |
| Aluminum | 1/2 ton | Other Metal | | PET #1 | | Other Plastic | 1/2 ton |
| Food Cans | | | | HDPE | | | |
| Non-ferrous | | | | Plastic Film | | | |
| Oil Filters | | | | Styrofoam | | | |
| Food | | Other Organics | | Household Hazardous Waste | | Waste Oil | |
| Wood | | | | Electronics | | Tires | |
| Pallets | | | | Construction and Demolition Waste | | Commingled Single Stream or Dual Stream | |
| Textiles | | | | Lead Acid Batteries | | White Goods | |
| | | | | Yard Waste | | Other | |

Other performance measures to consider dependent on the type of your project:

| | |
|---|--|
| Estimated Jobs to be Created | 0 |
| Estimated Jobs to be Retained | 0 |
| Estimated individuals Attending Training Provided | 1,000 students & staff combined |
| Other Measurable Outcome: | Total land fill diversion of Stars includes plastic bottles, aluminum cans & compost. Estimated above. |

Budget Worksheet

This page is to assist the grant applicant in preparing the District Sub-grantee or Plan Implementation Budget Form, Part 2. You will need to use the worksheet or supply the same information in a different format. Please add or delete rows, columns or sections as needed. Additionally, the information about status of position (i.e., filled) is frequently asked during MDNR review to determine if these are new positions being created as a result of the grant award. The information requested in the worksheet is required as justification of the budget submitted by the applicant.

Personnel:

Salary/Labor costs (Additional rows may be added, if needed)

| Name of Position | Currently filled Y/N | Estimated hourly wage including benefits (\$/hr)* | Hours on project | Total dollar amount | Grant Funded \$ | Match Funded \$ |
|------------------|-------------------------|---|------------------|---------------------|--------------------|--------------------|
| N/A | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Fringe Benefits are calculated and separately identified on the Budget Form.

Salary/Labor costs (Additional rows may be added, if needed)

| Name of Position | Currently filled Y/N | Estimated hourly wage including benefits (\$/hr)* | Hours on project | Total dollar amount | Grant Funded \$ | Match Funded \$ |
|------------------|-------------------------|---|------------------|---------------------|--------------------|--------------------|
| N/A | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Equipment:

"Equipment" means tangible, nonexpendable, personal property having a useful life of more than one year. Vehicles are always reported as equipment.

| Equipment Description | Page/Attachment in application with description | Estimated # of units | Cost per unit | Total Cost |
|-----------------------|---|----------------------|---------------|-------------|
| Recycling Bins | 12-13 | 50 | \$ | \$40,736.50 |
| | | | | |
| | | | | |
| Total Amount | | | | |

For items with an estimated cost of more than \$3,000.00, one quote/estimate is required. If you communicate directly with the vendor, you should let them know you are requesting the quote for budgetary purposes only and may not receive a grant to make a purchase. Additionally, upon grant award you will be required to obtain a formal bid from at least 3 sources prior to purchase of the equipment.

For items with an estimated cost of more than \$25,000.00, regardless of whether the line item is for one or multiple units, one formal quote from a vendor on their letterhead is required to be attached to the grant application. If you communicate directly with the vendor, you should let them know you are requesting the quote for budgetary purposes only and may not receive a grant to make a purchase. Additionally, upon grant award you will be required to competitively bid for purchase of the equipment/vehicle, etc.

Supplies:

"Supplies" means all tangible personal property other than equipment/vehicles, building and building site improvements. No documentation is required for the application unless a line item is estimated to cost more than \$3,000.00.

For items with an estimated cost of more than \$3,000.00, one quote/estimate is required. If you communicate directly with the vendor, you should let them know you are requesting the quote for budgetary purposes only and may not receive a grant to make a purchase. Additionally, upon grant award you will be required to obtain a formal bid from at least 3 sources prior to purchase of the supplies.



Quotation

Created Date 06/04/2018
 Quote Number 00008377
 Created By Ricardo Luzzuriga
 Expiration Date 06/06/2018

Bill To Name STATE FAIR COMMUNITY COLLEGE
 Bill To 3201 W 16th St, Sedalia, MO 65201, USA
 SEDALIA, Missouri 65301
 United States

Ship To Name STATE FAIR COMMUNITY COLLEGE
 Ship To 3201 West 16th St
 Sedalia, Missouri 65301
 United States

Prepared By Ricardo Luzzuriga
 Email ricardo.luzzuriga@cleanriver.com

Contact Name Justin O'Neal
 Phone (860) 666-7282
 Email joneal6@sfccmo.edu

Terms & Shipping Details

Payment Terms Net 30 Delivery Access Dock to Dock
 FOB Origin

| | | | | | | |
|---|-------|--|----------------------|------------|------------|-------------|
| FlaxE™ Bin Hinged Backboard -3 - FLEXEHNG-3-BB | 30.00 | 1 - Recycling; 2 - Compost; 3 - Custom | Custom Stream: Paper | \$339.95 | \$339.95 | \$10,198.50 |
| Transition Excel Start Top (recipator plates, Transition liner) - TXZ72-3 | 16.60 | 1 - Recycling; 2 - Compost; 3 - Custom | Custom Stream: Paper | \$1,645.00 | \$1,645.00 | \$16,450.00 |
| Large Poster - PO-1319 | 20.00 | | | \$65.00 | \$65.00 | \$1,300.00 |
| Transition® TIM Configurable Recycling Station - TIM81-3 | 10.00 | 1 - Recycling; 2 - Compost; 3 - Custom | Custom Stream: Paper | \$1,105.00 | \$1,105.00 | \$11,050.00 |
| X-Large Poster - PO-1524 | 10.00 | | | \$75.00 | \$75.00 | \$750.00 |
| Battery bin with solid lid & handle, white - BN-1BA-WE | 20.00 | | | \$7.95 | \$7.95 | \$158.00 |

| | | | |
|-------------|------------------------|-----------------------|-------------|
| Description | Shipping: Dock to Dock | Total Price | \$39,907.50 |
| | | Shipping and Handling | \$1,029.00 |
| | | Tax Rate | 0.00% |
| | | Total Tax | \$0.00 |
| | | Grand Total | \$40,936.50 |

Company Address 189 Earl Stewart Drive, Unit 1
 Aurora Ontario L4G8V5
 Canada

Phone (888) 648-4248
 Fax (905) 728-8859

A large, solid black rectangular area that covers the middle section of the page, likely representing a redacted image or a placeholder for a photograph.

**RECYCLING IS SMART.
YOU CAN MAKE IT SMARTER.**

Manufacturing recycling bins
and containers for over 25 years.

Product Catalog - Volume 9

[Faint, illegible text at the top of the page, possibly bleed-through from the reverse side.]

[Faint, illegible text in the middle section of the page.]

[Faint, illegible text in the lower middle section of the page.]

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REC-000000
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April 9, 2018

Re: State Fair Community College

To Whom It May Concern:

As President of State Fair Community College, I am fully aware that the College is applying for a grant to the West Central Solid Waste District, in order to fund recycling efforts to increase the amount of waste diverted from the landfill. I also am aware that the grant requires a 15 per-cent cash match towards the \$50,000.00 grant amount.

Cordially,


Dr. Joanna K. Anderson,
President

EXHIBIT 2, continued

BOX C AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS

I certify that State Fair Community College (Business Entity Name) MEETS the definition of a business entity as defined in section 285.529, RSMo, pertaining to section 285.530, RSMo, and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the bidder's/contractor's name and the MOU signature page completed and signed by the bidder/contractor and the Department of Homeland Security - Verification Division
- ✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: _____

(*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University - St. Louis; Missouri Southern State University - Joplin; Missouri Western State University - St. Joseph; Northwest Missouri State University - Maryville; Southeast Missouri State University - Cape Girardeau.)

Date of Previous E-Verify Documentation Submission: _____

Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted: _____

(if known)

Linda Ann Church
Authorized Business Entity Representative's
Name (Please Print)

Linda Church
Authorized Business Entity
Representative's Signature

134611
E-Verify MOU Company ID Number

lchurch@sfccmo.edu
E-Mail Address

State Fair Community College
Business Entity Name

4/9/18
Date

FOR STATE USE ONLY

Documentation Verification Completed By: _____

Buyer

Date

Company ID Number: 134611

THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION

MEMORANDUM OF UNDERSTANDING

ARTICLE I

PURPOSE AND AUTHORITY

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Social Security Administration (SSA), the Department of Homeland Security (DHS) and State Fair Community College (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). E-Verify is a program in which the employment eligibility of all newly hired employees will be confirmed after the Employment Eligibility Verification Form (Form I-9) has been completed.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note).

ARTICLE II

FUNCTIONS TO BE PERFORMED

A. RESPONSIBILITIES OF THE SSA

1. Upon completion of the Form I-9 by the employee and the Employer, and provided the Employer complies with the requirements of this MOU, SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all newly hired employees and the employment authorization of U.S. citizens.
2. The SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. The SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. The SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by the SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).
4. SSA agrees to establish a means of automated verification that is designed (in conjunction with DHS's automated system if necessary) to provide confirmation or tentative nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and aliens within 3 Federal Government work days of the initial inquiry.

Company ID Number: 134611

5. SSA agrees to establish a means of secondary verification (including updating SSA records as may be necessary) for employees who contest SSA tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and aliens within 10 Federal Government work days of the date of referral to SSA, unless SSA determines that more than 10 days may be necessary. In such cases, SSA will provide additional verification instructions.

B. RESPONSIBILITIES OF THE DEPARTMENT OF HOMELAND SECURITY

1. Upon completion of the Form I-9 by the employee and the Employer and after SSA verifies the accuracy of SSA records for aliens through E-Verify, DHS agrees to provide the Employer access to selected data from DHS's database to enable the Employer to conduct:

- Automated verification checks on newly hired alien employees by electronic means, and
- Photo verification checks (when available) on newly hired alien employees.

2. DHS agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.

3. DHS agrees to provide to the Employer a manual (the E-Verify Manual) containing instructions on E-Verify policies, procedures and requirements for both SSA and DHS, including restrictions on the use of E-Verify. DHS agrees to provide training materials on E-Verify.

4. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in the E-Verify program. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, and U.S. Department of Justice.

5. DHS agrees to issue the Employer a user identification number and password that permits the Employer to verify information provided by alien employees with DHS's database.

6. DHS agrees to safeguard the information provided to DHS by the Employer, and to limit access to such information to individuals responsible for the verification of alien employment eligibility and for evaluation of the E-Verify program, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security Numbers and employment eligibility, to enforce the Immigration and Nationality Act and federal criminal laws, and to ensure accurate wage reports to the SSA.

7. DHS agrees to establish a means of automated verification that is designed (in conjunction with SSA verification procedures) to provide confirmation or tentative nonconfirmation of employees' employment eligibility within 3 Federal Government work days of the initial inquiry.

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8. DHS agrees to establish a means of secondary verification (including updating DHS records as may be necessary) for employees who contest DHS tentative nonconfirmations and photo non-match tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

C. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the notices supplied by DHS in a prominent place that is clearly visible to prospective employees.

2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted regarding E-Verify.

3. The Employer agrees to become familiar with and comply with the E-Verify Manual.

4. The Employer agrees that any Employer Representative who will perform employment verification queries will complete the E-Verify Tutorial before that individual initiates any queries.

A. The employer agrees that all employer representatives will take the refresher tutorials initiated by the E-Verify program as a condition of continued use of E-Verify.

B. Failure to complete a refresher tutorial will prevent the employer from continued use of the program.

5. The Employer agrees to comply with established Form I-9 procedures, with two exceptions:

- If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2 (b) (1) (B)) can be presented during the Form I-9 process to establish identity).
- If an employee presents a DHS Form I-551 (Permanent Resident Card) or Form I-766 (Employment Authorization Document) to complete the Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The employer will use the photocopy to verify the photo and to assist the Department with its review of photo non-matches that are contested by employees. Note that employees retain the right to present any List A, or List B and List C, documentation to complete the Form I-9. DHS may in the future designate other documents that activate the photo screening tool.

6. The Employer understands that participation in E-Verify does not exempt the Employer from the responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, except for the following modified requirements applicable by reason of the Employer's participation in E-Verify: (1) identity documents must have photos, as described in paragraph 5 above; (2) a

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rebuttable presumption is established that the Employer has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of any individual if it obtains confirmation of the identity and employment eligibility of the individual in compliance with the terms and conditions of E-Verify ; (3) the Employer must notify DHS if it continues to employ any employee after receiving a final nonconfirmation, and is subject to a civil money penalty between \$500 and \$1,000 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) the Employer is subject to a rebuttable presumption that it has knowingly employed an unauthorized alien in violation of section 274A(a)(1)(A) if the Employer continues to employ any employee after receiving a final nonconfirmation; and (5) no person or entity participating in E-Verify is civilly or criminally liable under any law for any action taken in good faith on information provided through the confirmation system. DHS reserves the right to conduct Form I-9 compliance inspections during the course of E-Verify, as well as to conduct any other enforcement activity authorized by law.

7. The Employer agrees to initiate E-Verify verification procedures within 3 Employer business days after each employee has been hired (but after both sections 1 and 2 of the Form I-9 have been completed), and to complete as many (but only as many) steps of the E-Verify process as are necessary according to the E-Verify Manual. The Employer is prohibited from initiating verification procedures before the employee has been hired and the Form I-9 completed. If the automated system to be queried is temporarily unavailable, the 3-day time period is extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability. In all cases, the Employer must use the SSA verification procedures first, and use DHS verification procedures and photo screening tool only after the the SSA verification response has been given.

8. The Employer agrees not to use E-Verify procedures for pre-employment screening of job applicants, support for any unlawful employment practice, or any other use not authorized by this MOU. The Employer must use E-Verify for all new employees and will not verify only certain employees selectively. The Employer agrees not to use E-Verify procedures for re-verification, or for employees hired before the date this MOU is in effect. The Employer understands that if the Employer uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and the immediate termination of its access to SSA and DHS information pursuant to this MOU.

9. The Employer agrees to follow appropriate procedures (see Article III.B. below) regarding tentative nonconfirmations, including notifying employees of the finding, providing written referral instructions to employees, allowing employees to contest the finding, and not taking adverse action against employees if they choose to contest the finding. Further, when employees contest a tentative nonconfirmation based upon a photo non-match, the Employer is required to take affirmative steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

10. The Employer agrees not to take any adverse action against an employee based upon the employee's employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1 (l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification to verify work authorization, a tentative nonconfirmation, or the finding of

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a photo non-match, does not mean, and should not be interpreted as, an indication that the employee is not work authorized. In any of the cases listed above, the employee must be provided the opportunity to contest the finding, and if he or she does so, may not be terminated or suffer any adverse employment consequences until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo non-match, then the Employer can find the employee is not work authorized and take the appropriate action.

11. The Employer agrees to comply with section 274B of the INA by not discriminating unlawfully against any individual in hiring, firing, or recruitment or referral practices because of his or her national origin or, in the case of a protected individual as defined in section 274B(a)(3) of the INA, because of his or her citizenship status. The Employer understands that such illegal practices can include selective verification or use of E-Verify, discharging or refusing to hire eligible employees because they appear or sound "foreign", and premature termination of employees based upon tentative nonconfirmations, and that any violation of the unfair immigration-related employment practices provisions of the INA could subject the Employer to civil penalties pursuant to section 274B of the INA and the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-7688 or 1-800-237-2515 (TDD).

12. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.

13. The Employer agrees that it will use the information it receives from the SSA or DHS pursuant to E-Verify and this MOU only to confirm the employment eligibility of newly-hired employees after completion of the Form I-9. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords) to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU.

14. The Employer acknowledges that the information which it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a (i) (1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)), and that any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

15. The Employer agrees to allow DHS and SSA, or their authorized agents or designees, to make periodic visits to the Employer for the purpose of reviewing E-Verify related records, i.e., Forms I-9, SSA Transaction Records, and DHS verification records, which were created during the Employer's participation in the E-Verify Program. In addition, for the purpose of evaluating E-Verify, the Employer agrees to allow DHS and SSA or their authorized agents or designees, to interview it regarding its experience with E-Verify, to interview employees hired during E-Verify use concerning their experience with the pilot, and to make employment and E-Verify related records available to DHS and the SSA, or their designated agents or designees. Failure to comply with the terms of this paragraph may lead DHS to terminate the Employer's access to E-Verify.

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ARTICLE III

REFERRAL OF INDIVIDUALS TO THE SSA AND THE DEPARTMENT OF HOMELAND SECURITY

A. REFERRAL TO THE SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. The Employer will refer employees to SSA field offices only as directed by the automated system based on a tentative nonconfirmation, and only after the Employer records the case verification number, reviews the input to detect any transaction errors, and determines that the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security Number to SSA for verification again if this review indicates a need to do so. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.
3. If the employee contests an SSA tentative nonconfirmation, the Employer will provide the employee with a referral letter and instruct the employee to visit an SSA office to resolve the discrepancy within 8 Federal Government work days. The Employer will make a second inquiry to the SSA database using E-Verify procedures on the date that is 10 Federal Government work days after the date of the referral in order to obtain confirmation, or final nonconfirmation, unless otherwise instructed by SSA or unless SSA determines that more than 10 days is necessary to resolve the tentative nonconfirmation.
4. The Employer agrees not to ask the employee to obtain a printout from the Social Security Number database (the Numident) or other written verification of the Social Security Number from the SSA.

B. REFERRAL TO THE DEPARTMENT OF HOMELAND SECURITY

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.
2. If the Employer finds a photo non-match for an alien who provides a document for which the automated system has transmitted a photo, the employer must print the photo non-match tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the finding.
3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation received from DHS automated verification process or when

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the Employer issues a tentative nonconfirmation based upon a photo non-match. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will provide the employee with a referral letter and instruct the employee to contact the Department through its toll-free hotline within 8 Federal Government work days.

5. If the employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will provide the employee with a referral letter to DHS. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will send a copy of the employee's Form I-551 or Form I-766 to DHS for review by:

- Scanning and uploading the document, or
- Sending a photocopy of the document by an express mail account (furnished and paid for by DHS).

7. The Employer understands that if it cannot determine whether there is a photo match/non-match, the Employer is required to forward the employee's documentation to DHS by scanning and uploading, or by sending the document as described in the preceding paragraph, and resolving the case as specified by the Immigration Services Verifier at DHS who will determine the photo match or non-match.

ARTICLE IV

SERVICE PROVISIONS

The SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access the E-Verify System, an Employer will need a personal computer with Internet access.

ARTICLE V

PARTIES

This MOU is effective upon the signature of all parties, and shall continue in effect for as long as the SSA and DHS conduct the E-Verify program unless modified in writing by the mutual consent of all parties, or terminated by any party upon 30 days prior written notice to the others. Any and all system enhancements to the E-Verify program by DHS or SSA, including but not limited to the E-Verify checking against additional data sources and instituting new verification procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes. DHS agrees to train employers on all changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify manual. Even

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**INFORMATION REQUIRED
FOR THE E-VERIFY PROGRAM**

Information relating to your Company:

Company Name: State Fair Community College

Company Facility Address: 3201 West 16th Street
Sedalia, MO 65301

Company Alternate Address: _____

County or Parish: PETTIS

Employer Identification Number: 43089976

North American Industry
Classification System Code: 611

Parent Company: _____

Number of Employees: 500 to 999 Number of Sites Verified for: 1

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State.

- MISSOURI 1 site(s)

Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

| | | | |
|-------------------|--|-------------|------------------|
| Name: | Jamini M Nash | Fax Number: | (660) 596 - 7456 |
| Telephone Number: | (660) 596 - 7482 | | |
| E-mail Address: | jnash@sfcems.edu | | |
| Name: | Connie A Chamberlain | Fax Number: | (660) 596 - 5676 |
| Telephone Number: | (660) 596 - 7481 | | |
| E-mail Address: | cchamberlain@sfcems.edu | | |
| Name: | Janice M Esser | Fax Number: | (660) 596 - 5676 |
| Telephone Number: | (660) 596 - 7483 | | |
| E-mail Address: | jesser@sfcems.edu | | |

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without changes to E-Verify, the Department reserves the right to require employers to take mandatory refresher tutorials.

Termination by any party shall terminate the MOU as to all parties. The SSA or DHS may terminate this MOU without prior notice if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established procedures or legal requirements. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as they may determine.

Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.

Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.

The employer understands that the fact of its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to, Congressional oversight, E-Verify publicity and media inquiries, and responses to inquiries under the Freedom of Information Act (FOIA).

The foregoing constitutes the full agreement on this subject between the SSA, DHS, and the Employer.

The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively.

To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify Operations at 888-464-4218.

Employer State Fair Community College

Jauha M Nash

Name (Please type or print)

Title

Electronically Signed

07/08/2008

Signature

Date

Department of Homeland Security – Verification Division

Company ID Number: 134611

USCIS Verification Division

Name (Please type or print)

Title

Electronically Signed

07/08/2008

Signature

Date