



State of North Carolina Department of Health and Human Services Division of Services for the Deaf and Hard of Hearing

AMENDMENT #1

THIS AMENDMENT MUST BE SIGNED AND RETURNED

Issue Date: December 21, 2016

RFA Name: REQUEST FOR APPLICATIONS (RFA)

National Deaf-Blind Equipment Distribution Program (NDBEDP) Trainer Vendor List

RFA Number: 2601608DSDHH-NT

Initial RFA Posted Date: August 15, 2016

Sign and return this amendment by or before 5:00 pm (ET) January 17, 2017

INSTRUCTIONS:

- 1. Revisions to the Request For Applications (RFA) with Posted Date of August 15, 2016:
 - A. The RFA number shall immediately be 2601608DSDHH-NT. Henceforth, when referencing this RFA for any reason, refer to it by number as priority identification.
 - B. Section 4) ELIGIBILITY OF APPLICANT, specifically subsection g) is changed:

From:

g) Have clearance from Human Resources determined by results of drug testing and criminal background check. DSDHH shall have on file a consent and clearance of drug test and criminal background results valid from date the Contractor is approved to be an assistive technology equipment trainer through June 30, 2019. The Contractor shall submit to these tests by signing authorization forms (Attachments G, H, & I) and returning the signed documents with this RFA to the NDBEDP Administrator.

To:

g) Have clearance from Human Resources determined by results of a criminal background check. DSDHH shall have on file a consent and clearance of a criminal background results valid from date the Contractor is approved to be an assistive technology equipment trainer through June 30, 2019. The Contractor shall submit to this criminal background check by signing authorization forms (Attachments H & I) and returning the signed documents with this RFA to the NDBEDP Administrator.

C.	. Section 6.3 Additional Contractor Requirements, specifically subsection b) is changed:		
	From:		
	b)	To submit to drug testing and criminal background check as defined or described in Attachments G and H	
	To		
	b)	To submit to a criminal background check as defined or described in Attachment H	
D.		ction 14) APPLICATION CONTENT AND INSTRUCTIONS, specifically subsection 9) is deleted in entirety.	
E.	ΑP	achment G, DEPARTMENT OF HEALTH AND HUMAN SERVICES DRUG TEST PROGRAM PLICANT CONSENT AND ACKNOWLEDGEMENT FORM incorporated into the RFA released on gust 15, 2016 is deleted in its entirety.	
F.	Eq	reafter, the RFA released on August 15, 2016 and this Amendment #1 shall become the RFA for uipment and Technology Training specific to use of Assistive Technology for Deaf-Blind and shall nain the final RFA until amended or replaced.	
the RI	Ā re	ting the information below, an individual contracted for training services understands and agrees that eleased on August 15, 2016 and Amendment #1 are unified and are the documents that represent the nt RFA and resulting contracts for the training services.	
Execut	e Am	endment #1:	
CONTI	RACT	OR	
ADDRI	ESS (CITY & STATE):	
AUTHO	DRIZE	ED SIGNATURE: DATE:	
NAME	and 7	TITLE (Print):	