# Coffee County School System Douglas, GA

# Request for Proposal Aruba WAP Advanced Licenses

E-rate Funding Year 2025-2026



December 2024

#### INTRODUCTION and INSTRUCTIONS TO VENDORS

The Coffee County School system invites vendors to submit proposals in accordance with the terms and conditions of this Request for Proposal (RFP). This RFP provides the requirements and evaluative criteria for a set of Advanced Aruba WAP Licenses and requests a detailed response from all prospective vendors, including pricing and service descriptions, in a specified format.

#### **Invoicing**

Vendors submitting responses to this Request for Proposal agree to provide discounted billing for products and/or services associated with the projects and seek reimbursement of the discount according to the invoicing guidelines of the Schools and Libraries Division. The Owner will pay for the discounted portion of the invoice when the products and/or services listed on the invoice are delivered in accordance with the contract. Should E-rate funding not become available, the Owner stands ready to pay the full contracted amount.

#### **Background Information**

The Coffee County School System is located in Douglas, Georgia, Coffee County. Our enrollment is approximately 7600 students, and we employ nearly 1200 staff members in 14 separate locations. All sites are connected to our central data center by leased fiber.

#### **General Conditions**

This RFP is not a contract offer. Acceptance of a proposal neither commits Coffee County School System to award a contract to any vendor, even if all requirements stated in this RFP are met, nor limits our rights to negotiate in our best interest. We reserve the right to contract with a vendor for reasons other than price.

Failure to answer any questions in this RFP may subject the proposal to disqualification. Failure to meet qualifications and requirements will not necessarily subject a proposal to disqualification.

It is important that the vendor understand that this service has been included on the Coffee County School System's E-Rate application which, if approved, will entitle us to discounted services through the Universal Fund.

#### Valid Period of Offer

The pricing, terms, and conditions stated in your submitted proposal must remain valid for 60 days from the date of delivery of the proposal to Coffee County School System.

#### **Right of Rejection**

We reserve the right to accept or reject any or all responses to this RFP and to enter into discussions and/or negotiations with one or more qualified vendors at the same time, if such actions are in the best interest of Coffee County School System.

#### **Cost of Proposals**

Expenses incurred in the preparation of proposals in response to this RFP are the sole responsibility of the vendor.

#### **Instructions and Target Dates**

The following section includes information governing the preparation and due dates of the proposal to be submitted.

#### PROPOSAL DELIVERY

#### **Proposal Submission**

Proposal responses should be submitted in a sealed envelope addressed to the following no later than **3:00 PM EST, Tuesday January 21, 2025.** Bids must be received at the Coffee County Board of Education by this date. **Envelopes should be marked "Advanced Licenses."** Hand delivery of bids is an option if mailing will not result in receipt of timely bid documents. No faxed or emailed copies will be accepted. The acceptance of any or all alternatives will be at the discretion of the School System.

Send Proposals to:

Coffee County Board of Education ATTN: Logan Evans - Director of Information Systems 211 Gaskin Ave South Douglas, GA 31533

Feel free e-mail by January 16, 2025 (<u>logan.evans@coffee.k12.ga.us</u>) if you have any questions. The district is closed between December 21, 2024 and January 5, 2025, so emails questions may be addressed on or after January 3, 2025.

Calls may be made December 16-20, 2024 and on or after January 3, 2025 to Logan Evans at 912-389-6773.

| Schedule of Events                  |   |  |  |
|-------------------------------------|---|--|--|
| Date                                | Event   |  |  |
| Monday, December 16, 2025           | Distribute RFP via www.coffee.k12.ga.us   |  |  |
| 3:00 PM, Thursday, January 16, 2025 | End of questions to the district about the bid  |  |  |
| 3:00 PM, Tuesday, January 21, 2025  | Receipt of Proposals  |  |  |
| 3:15 PM, Tuesday, January 21, 2025  | Opening of Bids, Committee Review of Bids –<br>Make Recommendations for Selected Vendor |  |  |
| 5:30 PM, Thursday, January 23, 2025 | Vendor Selection presented to Board of Education at January Work Session                |  |  |
| 7:00 PM, Thursday, January 23, 2025 | Board of Education Approval of Vendor at January Regular Meeting                        |  |  |
| 10:00 AM, Friday, January 24, 2025  | Announcement of Vendor Selection  |  |  |

#### PROPOSAL PREPARATION

#### **Required Proposal**

Each proposal must include the information requested on the specified RESPONSE FORM that follows.

#### **Evaluation Criteria**

Coffee County School System evaluates and weighs the following criteria when considering our future provider of Aruba Advanced Licenses. These standards are listed in descending order of importance.

| Evaluation Criteria  | Weight     |
|--|------------|
| Cost effectiveness of Product  | 60 points  |
| Adequacy of the response to this RFP   | 20 points  |
| Satisfactory previous business/working relationship with the provider or its staff | 10 points  |
| References   | 5 points   |
| Local or in-state vendor   | 5 points   |
| Total  | 100 points |

#### **Advanced Licenses**

The Coffee County School System (CCSS) is requesting sealed proposals for a set of eight hundred (800) Aruba Advanced 1 Year WAP Licenses.

### **Specifications**

CCSS is seeking sealed proposals from Authorized Aruba resellers to purchase Advanced Wireless Access Point Licenses for the fleet of APs deployed in the school district.

#### **Other Conditions**

Any and all equipment, if applicable, shall be new, factory-sealed equipment currently available from the manufacturer; the District will not accept proposals of used, remanufactured, refurbished, "B stock," returns, open-box, discontinued, "gray market," or equipment in any condition other than new and factory-sealed with all original manufacturer warranties. The District reserves the right to adjust quantities prior to purchasing based on availability of funding, and shall have the sole discretion to evaluate, ascertain, and determine whether any item proposed or offered by any bidder is in fact an equivalent or better for any item listed. It is the vendor's responsibility and obligation to provide documentation and other evidence that alternative equipment is functionally equivalent or better. Failure to show equal functionality may result in the disqualification of the bid.

# **RESPONSE FORM**

## **Statement of Vendor's Qualification**

To accompany proposals submitted for the Coffee County School System.

|  | m                                  |  |     |
|--|------------------------------------|--|-----|
| Name of Company Re   | presentative                       |  |     |
| Business Address   |                                    |  |     |
|  |                                    |  |     |
|  |                                    |  |     |
|  |                                    |  |     |
| Phone Number   |                                    |  |     |
| Email Address  |                                    |  |     |
| When Organized   |                                    |  |     |
| Where Organized  |                                    |  |     |
| How many years engage  | ged in this                        |  |     |
| business under the curr  | rent firm                          |  |     |
| name?  |                                    |  |     |
| Partnership  | ]                                  | *SPIN Number:  |     |
| Corporation  | 1                                  |  |     |
| Corporation  |                                    | *Vendor must provide a Service Provider Information Number assigned by the Schools and Libraries   |     |
|  |                                    | Division (SLD)   |     |
| Attachments  |                                    |  |     |
|  |                                    |  |     |
| Please attach to this sta  | itement at least t                 | hree references, including: (Key Contact name, address, tit  | le. |
|  |                                    | three references, including: (Key Contact name, address, tittle work performed for the organization, including dates of work performed for the organization, including dates of work performed for the organization. |     |
|  |                                    | three references, including: (Key Contact name, address, tithwork performed for the organization, including dates of wo  |     |
| phone number and brie  | ef description of                  |  |     |
| phone number and brie  | ef description of                  | work performed for the organization, including dates of wo   |     |
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| phone number and brief. The above statements is  | ef description of                  | work performed for the organization, including dates of wo   |     |
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| phone number and brief. The above statements is  | ef description of                  | work performed for the organization, including dates of wo   |     |
| phone number and brief The above statements in Firm Name Representative (printed name)   | ef description of                  | work performed for the organization, including dates of wo   |     |
| phone number and brief The above statements in Firm Name Representative (printed name) Signature   | ef description of                  | work performed for the organization, including dates of wo   |     |
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| phone number and brief The above statements in Firm Name Representative (printed name) Signature Title Date                                | ef description of                  | work performed for the organization, including dates of wo   |     |
| phone number and brief The above statements in  Firm Name Representative (printed name) Signature Title Date  Notary Signature             | ef description of                  | work performed for the organization, including dates of work ped and sworn before a Notary Public.   |     |
| phone number and brief The above statements in Firm Name Representative (printed name) Signature Title Date  Notary Signature Notary State | ef description of must be subscrib | work performed for the organization, including dates of work ped and sworn before a Notary Public.   |     |
| phone number and brief The above statements in  Firm Name Representative (printed name) Signature Title Date  Notary Signature             | ef description of must be subscrib | work performed for the organization, including dates of work ped and sworn before a Notary Public.   |     |

|  | CONTRACT PRICE FO                | ORM                             |
|--|----------------------------------|---------------------------------|
| Vendor Firm Name                             |                                  | _                               |
| SPIN Number                                  |                                  |                                 |
| Representative (printed name)                |                                  | <del>-</del><br>-               |
| Signature                                    |                                  | _                               |
| Title  |                                  | _                               |
| Date   |                                  | _                               |
|  |                                  |                                 |
|  |                                  | SEAL/STAMP                      |
| Notary Signature                             |                                  | _                               |
| Notary State                                 |                                  | <u>_</u>                        |
| Commission Expiration Date                   |                                  | <u>_</u>                        |
| Date of Notarization                         |                                  | _                               |
| Fo accompany proposals sub<br>School System. | bmitted for Aruba Advanced WAI   | Plicenses for the Coffee County |
|  |                                  |                                 |
| Service Dates:                               | 2026                             |                                 |
| Year 1: July 1, 2025 – June 30               | VAP Licenses Pricing (1-Year)    | \$                              |
| 600 Aruba Auvance v                          | v Ar Licenses Frieling (1-1 ear) | φ                               |

### **LIST OF VENDOR'S EXCEPTIONS**

Contractor shall list any exceptions to these specifications or general conditions.

The Owner reserves the right to reject any or all bids and to waive any informality in the bidding. No bid may be withdrawn for a period of thirty days subsequent to the opening of bids without written consent of the Owner.