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**Karuk Community Health Clinic**

64236 Second Avenue  
Post Office Box 316  
Happy Camp, CA 96039  
Phone: (530) 493-5257  
Fax: (530) 493-5270

# Karuk Tribe

**Karuk Dental Clinic**

64236 Second Avenue  
Post Office Box 1016  
Happy Camp, CA 96039  
Phone: (530) 493-2201  
Fax: (530) 493-5364

**Administrative Office**

Phone: (530) 493-1600 • Fax: (530) 493-5322  
64236 Second Avenue • Post Office Box 1016 • Happy Camp, CA 96039

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**Request for Proposals****18-RFP-026**

**For More Information Contact:** Aja Conrad, (530) 627-3446 ext. 3025, [aconrad@karuk.us](mailto:aconrad@karuk.us)  
**Proposal Deadline:** Friday, September 7<sup>th</sup>, 2018 no later than 5:00 PM (Pacific Standard Time)

The Karuk Tribe requests proposals for the following Scope of Work from qualified individuals:

**Scope of Work**

Qualified individuals shall be available on-call to facilitate and instruct **First Aid/CPR** classes as needed / requested in Orleans, California. Applicant is responsible and liable for full compliance with Federal, State, and local regulations regarding the work to be performed.

**Duration of Services**

The Karuk Tribe anticipates the service period for this work to be from approximately September 15, 2018 through September 30, 2020.

**General Functions:****Task 1 – Course Materials/Certifications**

Provide all materials for First Aid/CPR class. Provide certification cards to all successful participants.

**Task 2 – Maintain Attendance Records**

Facilitator will be responsible for obtaining participants signatures and reporting to Director on attendance.

**Task 3 – Course Advertisement**

Facilitator will assist in the recruitment of class participants through advertising and posting of the class opportunity.

**Responses to this Request for Proposals should include the following:**

- 1) A statement of qualifications, including relevant instructor experience.
- 2) A statement of the amount of time needed in advance to schedule a class, and any limitations to the number of classes that can be taught in a given time period.
- 3) A statement identifying whether the applicant would be willing to teach the class in other Tribal communities (Happy Camp and/or Yreka).
- 4) A proposed course description stating the minimum and the maximum number of participants needed to successfully facilitate the course, as well as the expected duration of a class.
- 5) A price page that breaks down the total cost per participant and travel expense rates for each service area (Orleans, Happy Camp, and Yreka).
- 6) Names and telephone numbers of three client references.

**Responses must be hand, mail, or email delivered by September 7<sup>th</sup>, 2018 no later than 5:00 PM (Pacific Standard Time) to:**

Emma Lee Perez  
Karuk Tribe – Administration Office  
64236 Second Avenue  
PO Box 1016  
Happy Camp, CA 96039  
Emails will be accepted at: [emmaleeperez@karuk.us](mailto:emmaleeperez@karuk.us)

**Indian Preference will apply in the selection process in accordance with the Tribal Employment Rights Ordinance (TERO) and/or Indian Preference Act of 1934 (Title 25, USC, Section 47), based on funding source requirements.**

**All contracts that exceed \$2,500.00 shall be subject to a two percent (2%) Tribal Employment Rights Fee in accordance with the TERO Ordinance.**

**If applicable, construction contracts in excess of \$2,000, when required by Federal grant program legislation, are subject to compliance with the Davis-Bacon Act (40 USC 276a to a-7) as supplemented by Department of Labor regulations (29 CFR part 5).**

**Price Page for 18-RFP-026:**

**Proposal Submitted by:**

**Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Amount requested to be compensated for:**

**Additional costs:** \_\_\_\_\_

**List previous experience providing services for events/activities below:**

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**List up to three references with phone numbers below:**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**Other Comments:**

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