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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

**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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**Karuk Dental Clinic**

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

**Request for Qualifications****15-RFP-040**

**For More Information:** Debbie Bickford, (530) 493-1600, dbickford@karuk.us

**Proposal Deadline:** September 3<sup>rd</sup>, 2015 no later than 5:00PM (Pacific Standard Time)

Target date of clinic is Saturday, September 12, 2015 in Happy Camp.

The Karuk Tribe respectfully requests a statement of qualifications from interested parties to organize and conduct a one day soccer event. The selected individual shall be responsible for the following:

**Task One:** Partner with Tribal youth/parents and the Karuk Tribe to develop and coordinate a one day youth soccer clinic in Happy Camp.

**Task Two:** Provide instruction on three basic skills: Dribble, Pass, and Shoot a soccer ball. Provide instruction on how to implement these skills as a team.

**Task Three:** Organize a 20 minute demo game for varied age groups for parents to watch at the end of the event.

**Task Four:** Work cooperatively with stakeholders to implement a strategy for achieving youth sports program goals. Meet with parents at the end of the event to determine if there is enough interest to coordinate a soccer sports program in Happy Camp.

**Task Five:** Partnering with youth and adult professionals to identify barriers to effective youth recruitment and solutions.

Specifically, the selected individual shall be responsible for organizing and running a one day soccer event as required by the Karuk Tribe and the “Coverage for Kids” Grant. The ideal candidate should be comfortable coordinating efforts and have the knowledge and ability to organize and meet the required criteria. Selected person must also be able to assist in the completion all required documentation and reports as necessary.



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

- 1) A statement of qualifications, including the candidate's experience in organizing or participating in youth sports events/activities. A statement by the candidate indicating their knowledge of the rules of soccer.
- 2) A statement by the candidate indicating their consent to a pre-contract award background check and drug screen.
- 3) Proof of CPR/First Aid Certification.
- 4) Names, telephone numbers, and email addresses of three personal references.

**Responses must be hand, mail, or email delivered by September 3<sup>rd</sup>, 2015 no later than 5:00PM (Pacific Standard Time) to:**

Emma Lee Perez, Contract Compliance Specialist  
Karuk Tribe – Administration Office  
64236 Second Avenue  
P.O. Box 1016  
Happy Camp, CA 96039  
**Faxes will not be accepted**  
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).**

**A background check consisting of employment history, professional references, and criminal check may be conducted. Applicants will be required to pass the background check in accordance to the Karuk Tribe Personnel Policy and Federal/State/Tribal requirements.**

**Price Page for RFQ Karuk Youth Soccer Event Director**

**Proposal Submitted by:**

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

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

**List previous experience in organizing youth sports events/activities below (submit extra pages if needed):**

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**List three references with phone numbers and emails below:**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

**Other Comments:**

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