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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

**Karuk Dental Clinic**

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

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**Request for Proposals****13-RFP-023**

**For More Information:** Carlotta Whitecrane (530) 627-3446, ext. 3014

**Proposal Deadline:** Friday, September 27<sup>th</sup>, 2013 no later than 5 p.m. (Pacific Standard Time)

The Karuk Tribe requests proposals for the following Scope of Work required for Karuk Environmental Education Program for work to be completed from October 1, 2013 through September 30, 2014.

**Task One- Coordination**

Consultant shall collaborate with all interested educators within the Karuk Ancestral Territory to develop a curriculum-planning calendar of Environmental Education activities in coordination with elementary and high school level Environmental Education Programs. Under direct supervision from Department of Natural Resources (DNR) staff, the consultant will work collaboratively with school staff, parents, and natural resource professionals to implement the Karuk Environmental Education Program.

**Task Two- Fish Biology**

Working with Tribal staff and select agencies, (i.e. Fish & Game, Forest Service and the Fish & Wildlife Service) students and teachers will receive training to learn the protocols of data collection for the Fall Chinook Salmon Run. Conduct weekly surveys, and incorporate an in-class compilation of fish biology lessons.

**Task Three- Reporting**

Consultant shall assist Tribal Staff in preparation of all quarterly and annual reporting requirements. Photos and supporting artifacts shall be included in all reports. Consultant shall submit articles to Tribal and community newsletters on a quarterly basis.

**Task Four- Grant research & development**

Consultant shall research additional Environmental Education funding sources and assist in grant development.

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

- 1) A statement of qualifications, including relevant project history.
- 2) A proposed approach and rationale for completion of the contract tasks described above, including descriptions of similar work previously completed and the results/benefits achieved.
- 3) Contract amount is limited to \$10,000.00, must attach price page.
- 4) Names and telephone numbers of three client references.

**Responses must be hand, mail, fax, or email delivered by Friday, September 27th, 2013 no later than 5 p.m. (Pacific Standard Time) to:**

Erin Hillman  
Director of Administration & Compliance  
64236 Second Avenue  
P.O. Box 1016  
Happy Camp, CA 96039  
Faxes will be accepted at: (530) 493-5322  
Emails will be accepted at: Ehillman@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 13-RFP-023:**

**Proposal Submitted by:**

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

**E-mail:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Amount requested to be compensated for each:**

- Task, meeting, event: \_\_\_\_\_
- Task, meeting, event: \_\_\_\_\_
- Task, meeting, event: \_\_\_\_\_
- Task, meeting, event: \_\_\_\_\_

**List previous experience providing food 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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**Price Page for 13-RFP-[023]:**

**Proposal Submitted by:**

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

**E-mail:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Lump sum amount requested to be compensated for:** \_\_\_\_\_

**Provide hourly rates:**

**Provide travel expense rates:**

**List previous experience providing food 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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