RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROG	RAM (QRTP)	
Respondent: Centers for Youth & Families		
Name of Reviewer:		
Date of Review: 4/8/2019		
Proposal received no later than required date and time	Pass	Fail
Receipt of original and required copies of the entire proposal:	/	
1 original copy 1 electronic copy	Pass	Fail
Signature pages signed		
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass/	Fail
EO 98-04 Disclosure Form signed	Pass	Fail
Provide brief explanation of any failed item(s):		
Send proposal for Phase 2 evaluation: Yes No		

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent:			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass	Fail	
Receipt of original and required copies of the entire proposal: 1 original copy 1 electronic copy	Pass	Fail	
Signature pages signed			
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed □	Pass	Fail	
EO 98-04 Disclosure Form signed	Pass	Fail	
Provide brief explanation of any failed item(s):			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROG	RAM (QRTP)	
Respondent: CMS Olidated YMM Sences		
Name of Reviewer:		
Date of Review: 4/8/2019		
Proposal received no later than required date and time	Pass	Fail
Receipt of original and required copies of the entire proposal: 1 original copy 1 electronic copy	Pass	Fail
Signature pages signed		
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed □	Pass	Fail
EO 98-04 Disclosure Form signed	Pass	Fail
Provide brief explanation of any failed item(s):		

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: Gase Can Counseling Associates			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass	Fail	
Receipt of original and required copies of the entire proposal:			
1 original copy 1 electronic copy	Pass	Fail	
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass	Fail	
EO 98-04 Disclosure Form signed	Pass	Fail	
Provide brief explanation of any failed item(s):			
Send proposal for Phase 2 evaluation: Yes No			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT I	PROGRAM (QRTP)	
Respondent: East Arkansas Youth Services		
Name of Reviewer:		
Date of Review:4/8/2019		
Proposal received no later than required date and time	Pass/_	Fail
Receipt of original and required copies of the entire proposal:	/	
1 original copy 1 electronic copy	Pass/	Fail
Signature pages signed		
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass	Fail
EO 98-04 Disclosure Form signed	Pass	Fail
Provide brief explanation of any failed item(s):		
Send proposal for Phase 2 evaluation: Yes No		

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: Free Will Baptist Ministeries			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass	Fail	
Receipt of original and required copies of the entire proposal:	/		
1 original copy 1 electronic copy	Pass	Fail	
Signature pages signed			
Signature Page signed by person authorized to legally bind the respondent.			
2) Vendor Agreement and Compliance Section 1 signed	Pass	Fail	
4) Vendor Agreement & Compliance Section 3,4,5 signed			
EO 98-04 Disclosure Form signed	Pass/_	Fail	
Provide brief explanation of any failed item(s):			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALT	REATMENT PROG	RAM (QRTP)	
Respondent: Ft 8mills Children's En	nergency C	he	
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time		Pass	Fail
Receipt of original and required copies of the entire proposed original copy 1 electronic copy	al:	Pass	Fail
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed		Pass	Fail
EO 98-04 Disclosure Form signed		Pass	Fail
Provide brief explanation of any failed item(s):			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: Moroke Carply Task Farce on Child Abuse			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass	Fail	
Receipt of original and required copies of the entire proposal:	Pass	Fail	
1 original copy 1 electronic copy	rass		
Signature pages signed			
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed	Pass	Fail	
5) Proposed Subcontractors Form signed			
EO 98-04 Disclosure Form signed	Pass	Fail	
Provide brief explanation of any failed item(s):			
Send proposal for Phase 2 evaluation: Yes No			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTE	REATMENT PROG	RAM (QRTP)		
Respondent: Ouadrita Childrens Ctr, INC.				
Name of Reviewer:				
Date of Review: 4/8/2019				
Proposal received no later than required date and time		Pass	Fail	
Receipt of original and required copies of the entire proposa 1 original copy 1 electronic copy	al:	Pass	Fail	
 Signature pages signed Signature Page signed by person authorized to legally bind the respondent. Vendor Agreement and Compliance Section 1 signed Vendor Agreement & Compliance Section 2 signed Vendor Agreement & Compliance Section 3,4,5 signed Proposed Subcontractors Form signed 		Pass_V	Fail	
EO 98-04 Disclosure Form signed		Pass	Fail	
Provide brief explanation of any failed item(s):				

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: Piney Ridge Treatment Center, LLC			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time		Pass	Fail
Receipt of original and required copies of the entire proposa	1:		
		Pass _	Fail
1 original copy 1 electronic copy			
Signature pages signed		******	
1) Signature Page signed by person authorized to			
legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed		./	
3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed		Pass/	Fail
5) Proposed Subcontractors Form signed			
EO 98-04 Disclosure Form signed		Pass V	Fail
LO 30-04 Disclosure i orni signed		rass <u>v</u>	raii
Provide brief explanation of any failed item(s):			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: The Boys Shelter			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass	Fail	
Receipt of original and required copies of the entire proposal:			
1 original copy	Pass	Fail	
1 electronic copy NO+ included			
Signature pages signed			
1) Signature Page signed by person authorized to legally bind the respondent.			
2) Vendor Agreement and Compliance Section 1 signed	Pass	Fail	
3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed □			
5) Proposed Subcontractors Form signed			
EO 98-04 Disclosure Form signed	Pass	Fail	
Provide brief explanation of any failed item(s):			
Send proposal for Phase 2 evaluation: Yes No			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)			
Respondent: United Methodist Children's Home			
Name of Reviewer:			
Date of Review: 4/8/2019			
Proposal received no later than required date and time	Pass/	Fail	
Receipt of original and required copies of the entire proposal: 1 original copy	Pass	Fail	
1 electronic copy			
Signature pages signed 1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass	Fail	
EO 98-04 Disclosure Form signed	Pass	Fail	
Provide brief explanation of any failed item(s):			
Send proposal for Phase 2 evaluation: Yes No			

RFQ # and Name; 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)				
Respondent: Vera Llyd Presbytenan Family Services				
Name of Reviewer:				
Date of Review: 4/8/2019				
Proposal received no later than required date and time	Pass	Fail		
Receipt of original and required copies of the entire proposal:	/			
1 original copy	Pass	Fail		
1 electronic copy				
Signature pages signed				
1) Signature Page signed by person authorized to legally bind the respondent.	,			
2) Vendor Agreement and Compliance Section 1 signed	Pass	Fail		
3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed				
5) Proposed Subcontractors Form signed				
EO 98-04 Disclosure Form signed	Pass	Fail		
Provide brief explanation of any failed item(s):				
Send proposal for Phase 2 evaluation: Yes No				

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)				
Respondent: Western DR Conselps & Guidance Che				
Name of Reviewer:				
Date of Review: 4/8/2019				
Proposal received no later than required date and time		Pass	Fail	
Receipt of original and required copies of the entire proposal	:		Fail	
1 original copy 1 electronic copy		Pass	Fail	
Signature pages signed				
Signature Page signed by person authorized to legally bind the respondent.		/		
 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 		Pass V	Fail	
5) Proposed Subcontractors Form signed				
EO 98-04 Disclosure Form signed		Pass	Fail	
		,		
Provide brief explanation of any failed item(s):				
Send proposal for Phase 2 evaluation:	No			

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)				
Respondent: Your Bridge				
Name of Reviewer:				
Date of Review: 4/8/2019				
Proposal received no later than required date and time	Pass	Fail		
Receipt of original and required copies of the entire proposal:	/			
1 original copy 1 electronic copy	Pass	Fail		
Signature pages signed				
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass/_	Fail		
EO 98-04 Disclosure Form signed	Pass	Fail		
Provide brief explanation of any failed item(s):				
Send proposal for Phase 2 evaluation: Yes No				

RFQ # and Name: 710-19-1025 QUALIFIED RESIDENTIALTREATMENT PROGRAM (QRTP)				
Respondent: Youth Home				
Name of Reviewer:				
Date of Review: 4/8/2019				
Proposal received no later than required date and time	Pass	Fail		
Receipt of original and required copies of the entire proposal:				
1 original copy 1 electronic copy	Pass	Fail		
Signature pages signed				
1) Signature Page signed by person authorized to legally bind the respondent. 2) Vendor Agreement and Compliance Section 1 signed 3) Vendor Agreement & Compliance Section 2 signed 4) Vendor Agreement & Compliance Section 3,4,5 signed 5) Proposed Subcontractors Form signed	Pass	Fail		
EO 98-04 Disclosure Form signed	Pass	Fail		
Provide brief explanation of any failed item(s):				
Send proposal for Phase 2 evaluation: Yes No				