**Schedule 6: RFP Submission Checklist You Must Insert Organization Name Here**

**This Checklist MUST appear at the FRONT of each copy of your completed RFP**

|  |  |  |  |
| --- | --- | --- | --- |
| **RFP Page #** | **Please check Yes or No in regard to your organization:** | **Yes****✓** | **No ✓** |
|  | Indigenous Non-Profit |  |  |
|  | Board of Directors is comprised of a majority of Indigenous Directors |  |  |
|  | Incorporated (or in the process of) in Ontario |  |  |
|  | Located in non-reserve urban or rural areas of Ontario |  |  |
|  | Head Office located off-reserve |  |  |
|  | Corporate Office located off-reserve |  |  |
|  | Operations located off-reserve |  |  |
|  | Intending to provide supportive housing for self-identifying Indigenous people who will reside off-reserve |  |  |
|  | Intending to use ISHP funding to provide supportive housing for 100% First Nation, Métis and Inuit households |  |  |
|  | Intending to provide supportive housing for Indigenous families and/or individuals, without priority given to members of any organization, First Nation, or tribal affliation unless otherwise provided for specifically under the program |  |  |
|  | Has capacity to develop, deliver, and operate the project(s) |  |  |
|  | Hiring policies demonstrate the use of the talent, skills, and experience of the Indigenous community |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **RFP****Page #** | **HAS YOUR PROPOSAL:**  | **Yes****✓** | **No ✓** |
|  | Outlined the justification for the project and provide evidence-based materials? |  |  |
|  | Explained inclusivity of people who self-identify as being First Nation, both status and non-status? |  |  |
|  | Explained inclusivity of people who self-identify as Métis? |  |  |
|  | Explained inclusivity of people who self-identify as Inuit? |  |  |
|  | Identified how you will be promoting the support services to those who identify as First Nation, status and non-status, Métis, and Inuit? |  |  |
|  | Indicated how, if project(s) is comprised of partnerships with non-Indigenous organizations, the Indigenous organization is the project lead and holds the majority for decision-making purposes, either by agreement or by Board resolutions provided at the time of application?  |  |  |

**REQUIRED ATTACHMENTS:**

|  |  |  |
| --- | --- | --- |
|  | **Page Reference****Number** |  |
|  |  | Completed RFP Template |
|  |  | Letters Patent |
|  |  | Corporation’s Constitution and By-Laws |
|  |  | Latest audited financial statements |
|  |  | Management Letters from Auditor(s) for last three years  |
|  |  | Partnership Commitment letter(s), financial or in-kind, if applicable |
|  |  | Corporation’s Hiring Policies |
|  |  | Operating Budget (Schedule 4) |
|  |  | Job descriptions, if applicable (see Section 4 of RFP Template) |

This checklist is provided as a summarized tool to help Service Providers prepare their submission. Requirements are fully outlined in the Program Guidelines and the RFP document as applicable. If you have any difficulty with this checklist, please contact us as soon as possible.

**ATTENTION: Seven (7) hard copies of your RFP and all attachments must be submitted by mail/courier to Ontario Aboriginal Housing Services and one (1) copy of your RFP and all attachments must be emailed to** **ishp@oahssc.ca****.**

Name: Signature:

Authorized Signing Authority Authorized Signing Authority