



**REQUEST FOR PROPOSAL
#V211-24-045**

**EXECUTIVE SEARCH SERVICES - ATHLETICS
29 January 2024**



Virginia Military Institute
Lexington, Virginia 24450-0304

REQUEST FOR PROPOSALS
RFP# V211-24-045

Issue Date: 29 January 2024
Title: VIRTUAL POST TOUR
Due Date: **29 February 2024 at 2:00 PM EST**

Commodity Codes: 91806 CONSULTING SERVICES
96130 SEARCH FIRM SERVICES

Issuing Agency: Virginia Military Institute
Procurement Services
330 Parade Avenue, Smith Hall #314
Lexington, VA 24450

Period of Contract: **Date of Award** through **30 June 2029** (Annually Renewable Thereafter for five (5) successive one (1) year renewals.)

Responses are to be submitted electronically through www.eva.virginia.gov. One redacted copy of the proposal including all attachments in accordance with the *Virginia Freedom of Information Act* is to be delivered to VMI electronically at procurement@vmi.edu.

PRE-PROPOSAL MEETING - There will be no pre-proposal conference held for this solicitation. Questions are to be submitted using the Understanding of Requirements form and emailed to procurement@vmi.edu (Appendix A)

In Compliance With This Request For Proposal And To All The Conditions Imposed Therein And Hereby Incorporated By Reference, The Undersigned Offers And Agrees To Furnish The Goods/Services In Accordance With The Attached Signed Response Or As Mutually Agreed Upon By Subsequent Negotiation.

Name and Address of Firm:

Collegiate Sports Associates, LLC
514 Vick Avenue
Raleigh, NC Zip Code: 27612
EVA Vendor ID or DUNS number 040835036
E-mail: info@collegiatesportsassociates.com

Date: 02/20/2024
By: 
(Signature In Ink)
Name: **Stephanie Garcia Cichosz**
(Please Print)
Title: Director of Strategic Communications
Phone: (910-722-4222)
Fax: ()

Minority Vendor: _____ Woman owned: _____ Small Business _____ SWaM Certification Number: _____

Note: This public body does not discriminate against faith-based organizations in accordance with the *Code of Virginia*, § 2.2-4343.1 or against a bidder or offeror because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment.

UNDERSTANDING OF REQUIREMENTS

OFFEROR: Collegiate Sports Associates, LLC

RFP#: RFP #V211-24-045

Date: 02/20.2024

The following question concerns specifications, Section (number) _____

Paragraph _____, page _____.

All responses to questions will be made by Addendum and posted to www.eVA.virginia.gov
Questions not submitted on this form WILL NOT BE ANSWERED.

Questions Submitted by: Stephanie Garcia Cichosz
NAME
Collegiate Sports Associates, LLC
ORGANIZATION
910-722-4222
PHONE
info@collegiatesportsassociates.com
EMAIL

E-Mail to: procurement@vmi.edu

CONFLICT OF INTEREST STATEMENT

Ensure that the solicitation is thoroughly read and completed. Complete, sign and return the information requested below with your proposal. FAILURE TO FURNISH THIS DATA MAY RESULT IN REJECTING YOUR PROPOSAL.

NAME: Collegiate Sports Associates, LLC

ADDRESS: 514 Vick Avenue

CITY/STATE: Raleigh, NC 27612

TELEPHONE NUMBER: 910-722-4222

FEDERAL ID NUMBER (FIN): 272969659

THE ABOVE FIRM IS A: (CHECK, AS APPLICABLE)

- SMALL BUSINESS
- INDIVIDUAL BUSINESS
- WOMAN-OWNED BUSINESS
- SOLE PROPRIETORSHIP
- MINORITY-OWNED BUSINESS
- PARTNERSHIP
- SHELTERED WORKSHOP
- CORPORATION

RELATIONSHIP WITH THE COLLEGE OF VIRGINIA:

IS ANY MEMBER OF THE FIRM AN EMPLOYEE OF THE COMMONWEALTH OF VIRGINIA WHO HAS A PERSONAL INTEREST IN THIS CONTRACT PURSUANT TO THE CODE OF VIRGINIA, SECTION 2.1-639.1-639.24? () YES () NO

IF YES, EXPLAIN:



 SIGNATURE OF OFFEROR

02/20/2024

 DATE

Please tell us how you received this solicitation:

- It was mailed to you directly.
- You requested a copy through the Virginia Business Opportunities.
- You obtained a copy from the Virginia Department of Minority Business Enterprise.
- Other (please specify) _____.

RETURN OF THIS PAGE IS REQUIRED

REFERENCES

Please list at least four references for whom you have performed each applicable category of service specified herein and within the past five years.

CLIENT: James Madison University Foundation

ADDRESS: 1031 Harrison St., Harrisonburg, VA, 22801

CONTACT
PERSON/PHONE#: Warren K. Coleman / 540-568-0373

APPROXIMATE DOLLAR VOLUME PER YEAR: \$40,000

PROJECTS/DATES/DESCRIPTION: Executive Search Services for a Head Football Coach, conducted 11/30/2023 - 12/7/2023

Ongoing - Executive Search Services for a Director of Athletics

CLIENT: George Mason University

ADDRESS: 4400 University Drive, Fairfax, VA, 22030

CONTACT
PERSON/PHONE#: Erin Rauch / 703-993-2580

APPROXIMATE DOLLAR VOLUME PER YEAR: \$55,000

PROJECTS/DATES/DESCRIPTION: Executive Search Services for a Director of Athletics, 11/30/2022 - 4/19/2023

Ongoing - Consulting Services, including a Gap Analysis and Strategic Plan

CLIENT: William & Mary

ADDRESS: 105 Jamestown Road, Williamsburg, VA, 23187

CONTACT
PERSON/PHONE#: Bill Vega / 757-221-3956

APPROXIMATE DOLLAR VOLUME PER YEAR: \$30,000

PROJECTS/DATES/DESCRIPTION: Executive Search Services for a Director of Athletics, conducted 3/15/2021 - 6/23/2021

Please use a separate sheet of paper for additional references.

SWaM (Small, Woman- and Minority-owned Businesses) Utilization Plan

Definitions

Small Business: "Small business " means an independently owned and operated business which, together with affiliates, has 250 or fewer employees, or average annual gross receipts of \$10 million or less averaged over the previous three years. Note: This shall not exclude SBSB-certified women- and minority-owned businesses when they have received SBSB small business certification.

Women-Owned Business: Women-owned business means a business concern that is at least 51% owned by one or more women who are citizens of the United States or non-citizens who are in full compliance with United States immigration law, or in the case of a corporation, partnership or limited liability company or other entity, at least 51% of the equity ownership interest is owned by one or more women who are citizens of the United States or non-citizens who are in full compliance with United States immigration law, and both the management and daily business operations are controlled by one or more women who are citizens of the United States or non-citizens who are in full compliance with the United States immigration law.

Minority-Owned Business: Minority-owned business means a business concern that is at least 51% owned by one or more minority individuals or in the case of a corporation, partnership or limited liability company or other entity, at least 51% of the equity ownership interest in the corporation, partnership, or limited liability company or other entity is owned by one or more minority individuals and both the management and daily business operations are controlled by one or more minority individuals.

All small businesses must be certified by the Commonwealth of Virginia, Department of Small Business and Supplier Diversity (SBSB) by the due date of the solicitation to participate in the SWaM program.
Certification applications are available through SBSB online at www.sbsd.virginia.gov (Certification Division).

Offeror Name: Collegiate Sports Associates, LLC

Preparer Name: Stephanie Garcia Cichosz **Date:** 02/20/2024

Instructions

- A. If you are certified by the Department of Small Business and Supplier Diversity (SBSB) as a small business, complete only Section A of this form. This shall not exclude SBSB-certified women-owned and minority-owned businesses when they have received SBSB small business certification.
- B. If you are not a SBSB-certified small business, complete Section B of this form. For the offeror to receive credit for the small business subcontracting plan evaluation criteria, the offeror shall identify the portions of the contract that will be subcontracted to SBSB-certified small business in this section. Points will be assigned based on each offeror’s proposed subcontracting expenditures with SBSB-certified small businesses for the initial contract period as indicated in Section B in relation to the offeror’s total price.

Section A

If your firm is certified by the Department of Small Business and Supplier Diversity (SBSB) **check which certification below and provide your certification number and date received:**

- N/A Small Business
- N/A Small and Women-owned Business
- N/A Small and Minority-owned Business

Certification number: _____ Certification Date: _____

Section B

Populate the table below to show your firm's plans for utilization of SBSB-certified small businesses in the performance of this contract. This shall not exclude SBSB-certified women-owned and minority-owned businesses when they have received the SBSB small business certification. Include plans to utilize small businesses as part of joint ventures, partnerships, sub-contractors, suppliers, etc.

B. Plans for Utilization of SBSB-Certified Small Businesses for this Procurement

Small Business Name & Address SBSB Certificate #	Status if Small Business is also: Women (W), Minority (M)	Contact Person, Telephone & Email	Type of Goods and/or Services	Planned Involvement During Initial Period of the Contract	Planned Contract Dollars During Initial Period of the Contract
N/A	N/A	N/A	N/A	N/A	N/A
Totals \$					