

**REQUEST FOR APPLICATION**

**Missouri Department of Corrections  
Fiscal Management Unit  
Purchasing Section  
2729 Plaza Drive, P.O. Box 236  
Jefferson City, MO 65102**

**Buyer of Record:  
Beth Lambert, Purchasing Manager  
Telephone: (573) 526-6494  
Beth.Lambert@doc.mo.gov**

**RFA SDA480-009**

**Community Reentry Funding  
Western Region & Eastern Region**

**Contract Period: Date of Award through  
June 30, 2018**

**Date of Issue: May 26, 2017**

**Page 1 of 55**

**Applications Must Be Received No Later  
Than:**

**2:00 p.m., June 22, 2017**

**Sealed applications must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The applicant should clearly identify the RFA number on the lower right or left-handed corner of the container in which the application is submitted to the Department. This number is essential for identification purposes.**

**We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding agreement, as defined herein, shall exist. The authorized signer of this document certifies that the awardee (named below) and each of its principals are not suspended or debarred by the federal government.**

Program Title: Learning to Earning  
Company Name: Metro Lutheran Ministry  
Mailing Address: 3031 Holmes Road  
City, State, Zip: Kansas City, MO 64109  
Telephone: (816) 258-3117 Fax: (816) 931-3511  
Federal EIN #: 43-0970991 State Vendor #:   
Email: jimglynn@mlmkc.org  
Authorized Signer's Printed Name and Title: Jim Glynn, Executive Director

Authorized Signature: 

Application Date: 6-15-17

In its entirety.

**NOTICE OF AWARD:**

This application is accepted by the Missouri Department of Corrections as follows:

Contract No. **SDA48000910**

W-010

  
Kenny Jones, Chairman, Board of Probation and Parole

Date 11-14-17

**The original cover page, including amendments, should be signed and returned with the application.**

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\_\_\_\_\_  
Date

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### Application Summary Form

#### COMMUNITY REENTRY FUND APPLICATION SUMMARY FORM

**THIS FORM MUST BE COMPLETED IN ITS ENTIRETY AND SUBMITTED TO BE CONSIDERED FOR AWARD.**

*Please select geographic area in accordance with the map attached: See Attachment 1*

*Amount of DOC  
Funds Requested:*

☒ **Western Region**      City/County Kansas City, Jackson County

\$ 50,000

☐ **Eastern Region**      City/County \_\_\_\_\_

*Program Title:* Learning to Earning

*Does this program complement another application? Yes \_\_\_\_\_ No X Name:* \_\_\_\_\_

*Provide a unique name descriptive of service or program for EACH application submitted*

*Applicant Agency and Address:*

Metro Lutheran Ministry  
3031 Holmes Road  
Kansas City, MO 64109

*Project Director Name, Phone, Fax & Email:*

Jim Glynn  
(816) 285-3117  
(816) 816-3511  
jimglynn@mlmkc.org

*Signature/Title*

*Date*

Jim Glynn Executive Director 6-15-17

*Anticipated Outputs: (number of offenders supervised by DOC to be served by the proposed project):*

30-33

*Estimated Cost per Offender:*

\$ 1,500

*# of Paid Staff: 2*

*# of Volunteers: 0*

*Summary of Proposed Project:* In a concise manner, provide a summary paragraph of your project.

Metro Lutheran Ministry proposes to provide employment and housing services to 30 offenders supervised by the Missouri Board of Probation and Parole through its Learning to Earning program. Employment services will include work readiness classes, assistance with job applications, resumes, and job search activities, as well as follow-up services. Housing services will include assistance with rental deposits and rent. These services align to the Service Supportive Housing preference identified by the Department of Corrections. Other wrap around services included in the project but not paid for out of this grant include assistance with food or transportation.

*In-Kind Contributions:* Applicant must identify all in-kind contributions which include "contributions other than cash." While these contributions usually add real value to a project, they do not require an additional cash outlay (e.g. donated labor, materials and services).

Applicants must provide in-kind and identify in-kind contributions their organizations will make to this project and how those contributions will help sustain the project. The funding resulting from an award of the RFA shall be considered seed funding to start initiatives with a strong sustainability plan indicated.

Attach a page identifying in-kind contributions.

## **In-Kind Contributions Attachment**

### **Metro Lutheran Ministry**

#### **Personnel**

Learning to Earning personnel (Jacob Bosch and Ashley Marmon) spend approximately 30 percent of their time working directly with reentry clients. The two staff members' salaries calculated at 30 percent each, totals \$23,565. MLM will use in-kind matching funds to match this amount. Additional existing agency funds from donations and grant revenue will be used to pay the salaries and benefits for existing staff who may also provide additional support services to the ex-offenders.

#### **Fringe Benefits**

The Department of Corrections only allows fringe benefits up to 12%. This is estimated to be \$2,827.90 for the two staff members. MLM will use matching in-kind support to match this amount for two staff members to cover their health insurance, Social Security/Medicare.

## Checklist for Application Submission

### REQUIRED FORM COMPLETED FORM TO BE RETURNED WITH APPLICATION

Check that all forms and narratives are complete and accurate. Submit the application narrative and forms in the following order to ensure credit for each of the categories as listed below.

NOTE: If narrative is not clearly marked by section, the evaluation team may not score the application.

1. ☒ **Request for Application Cover Page, including Cover Page(s) for any amendments** (see cover sheet)
2. ☒ **Checklist for Application Submission**
3. ☒ **Application Narrative** Not to exceed 10 pages. (see Part Three – Submission Requirements)
4. ☒ **Preference Points** (see 3.1 g)

Is service supported housing proposed? ☒ Yes ☐ No

Are sex offenders to receive rent/housing subsidy? ☐ Yes ☒ No

5. ☒ **Funding Sources** The applicant should identify on the Checklist for Application Submission the percentage of the applicant's total operating revenues which came from the following sources during the last fiscal year. (Total should equal 100%)

☐ <1 % Local government

☐ <1 % State government

☐ 13 % Federal government

☐ 15 % Direct donations from individuals

☐ 33 % Corporate or foundation grants

☐ 1 % Fee and charges for services, products, and sales

☐ <1 % Endowment and interest income

☐ 2 % Fundraisers or special events

☐ N/A % Membership fees

☐ 36 % Other sources (specify: In-Kind)

**100% Total**

6. ☒ **Supporting Documentation & Forms**
  - A. ☒ Exhibit A – Prior Experience of Applicant (mandatory form)
  - B. ☒ Exhibit B – Expertise of Personnel (mandatory form)
  - C. ☒ Exhibit C – Legal/Cancellation Actions Against Applicant (mandatory form)
  - D. ☒ Exhibit D – Performance Measures (mandatory form)
  - E. ☒ Exhibit E – Timeline (mandatory form)
  - F. ☒ Exhibit F – Budget Detail Worksheet (mandatory form)
  - G. ☒ Exhibit G – Budget Narrative (mandatory form)
  - H. ☒ Exhibit H – Missouri Service-Disabled Veteran Business Preference (optional form)
  - I. ☒ Exhibit I – Participation Commitment (optional form)
  - J. ☒ Exhibit J – Documentation of Intent to Participate for MBE/WBE (optional form)
  - K. ☒ Documentation of Nonprofit Corporation under Chapter 355 RSMo. or Section 501(C)(3) of the Internal Revenue Code (documentation needed)

NOTE: Questions relating to the RFA must be directed to Beth Lambert, of the Department of Corrections at either (573) 526-6494 or [Beth.Lambert@doc.mo.gov](mailto:Beth.Lambert@doc.mo.gov).

**Application Narrative (35 points):** Learning to Earning (LTE) is the workforce development portion of Metro Lutheran Ministry's (MLM) Family Empowerment Continuum, which provides services and case management to help offenders obtain employment and find permanent housing. The program rapidly addresses client's short-term needs while providing long-term solutions. For offenders, providing these services ensures they have a much higher chance of not returning to prison. LTE is centered on employment supports including competitive employment, rapid job search approach, and individualized job placements based on client preferences, strengths, and work experiences. Clients interact with staff to make strides toward goals, including résumé improvement, preparing for interviews, improving their financial situation, accessing public benefits, and addressing needs such as transportation, food, housing, and work-related clothing. Once employment is attained, it is vital for clients to budget wisely, reduce debt, and be able to maintain their employment and learn the skills necessary to develop income self-sufficiency through Empowerment Case Management. Through education and support, Learning to Earning assists clients and offenders to stop living from crisis to crisis and instead start saving money, reducing debt, and building assets like a car, a home, or an education.

Some survey data suggests that more than half of released offenders remain unemployed up to a year after their release from custody<sup>1</sup>. Staff use motivational interviewing to determine each client's readiness for change and to enhance clients' intrinsic motivation for change. They also measure relevant processes and practices and provide measurement feedback using the Arizona Self Sufficiency Matrix. Both these methods are recognized as one of the Eight Principles for Evidence Based Practice in Community Corrections. The program is also centered on some of the components (competitive employment, rapid job search approach, and

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<sup>1</sup> Center for Economic and Policy Research. Report: Ex-offenders and the Labor Market. John Schmitt and Kris Warner. November 2010.

individualized job placements according to client preferences, strengths, and work experiences) of Supported Employment, an evidence-based practice recognized by the Substance Abuse and Mental Health Services Administration (SAMHSA).<sup>2</sup> It's estimated that 63 percent of men and 75 percent of women in jails experience a mental health problem requiring mental health services in any given year.<sup>3</sup>

- 1) *Identify whether an existing program or service procedure is to be continued or replicated.*

The LTE program has been serving offenders reentering the community since 2013.

- 2) *Describe how the services will be provided-screening, assessment or referral procedures.*

Referrals: Learning to Earning (LTE) continues to make an effort to work in tandem with the corrections staff to provide more coordinated services. Offender referrals for the LTE program come through Probation and Parole Officers and Reentry Coordinators at the Kansas City Re-Entry Center as well as through Institutional Parole Officers at the Western Missouri Correctional Center. Occasionally, a Probation and Parole Officer visits the program because they heard from their parolee they were receiving services through the program. Several years ago, one of these visits grew into a relationship with the Second Chance program, who also provides referrals for services they are unable to financially support. In addition, MLM receives referrals from Gateway Foundation and Corizon Health. Gateway works directly with the corrections system on providing inpatient and outpatient drug and alcohol service and rehabilitation to inmates and those on parole. Corizon Health provides high quality healthcare and reentry services. MLM is able to work with these organizations to help reentry clients to acquire stable employment and housing.

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<sup>2</sup> Substance Abuse and Mental Health Services Administration. Supported Employment: The Evidence. DHHS Pub. No. SMA-08-4364, Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, 2009.

<sup>3</sup> James, D.J. and Glaze, L.E. Mental Health Problems of Prison and Jail Inmates. Bureau of Justice Statistics Special Report. Office of Justice Programs. U.S. Department of Justice. September 2006, NCJ 213600.

MLM is also involved with the Greater Kansas City Coalition to End Homelessness which is planning an entry-level job fair in the fall of 2017. These events are specifically designed to serve homeless, military veterans, and offenders and are the collaborative effort of 20 social service agencies. MLM continues key established collaborations with Avenue of Life to serve offenders re-entering our community and Episcopal Community Services, which provides financial literacy counseling for MLM clients. These efforts allow practitioners to share best practices, collaborate on individual cases, and teach each other about other service models. LTE staff discuss a variety of referral options and short-term training options with their clients to help them on their journey to finding and maintaining employment. Staff refer clients to partners such as Metropolitan Community College which offers a two-week logistics training program.

Assessment: Clients referred to Learning to Earning (LTE) sit down with staff one-on-one to complete an assessment. The purpose of this interview is to determine client eligibility and need for supportive services, and to develop a strategy to guide the client in the job search process. Staff ask about any potential barriers to employment such as medical issues, family issues, or the nature of the client's convictions, to develop a strategy to guide clients in the job search process. Any clients with a disability will be referred to Vocational Rehabilitation. The Empowerment Continuum and LTE program first ensures the client obtains some basic stability. Staff assess their long-term housing situation, employment, income resources, expenses, debts, and credit rating. Staff help clients develop a budget prioritizing food, shelter, and transportation to and from work. The staff member will also ask about their previous attempts at finding employment and barriers they encountered in the past. Staff use this information to design an individualized process for each client that focuses on resume assistance, life skills, and assistance with leads and interviewing. LTE Staff use tools such as the Arizona Self-Sufficiency Matrix,



MAACLink, a background check, and a credit check during their assessment. All client service data is collected and entered into MAACLink, the city-wide shared database for strength-based case management agencies as well as a HUD compliant Homeless Management Information System, managed by the Mid America Assistance Coalition. This avoids duplication of services/assistance to an individual and provides for accurate reporting to stakeholders. A financial assessment reveals the individual's earning potential and if the individual has child support obligations, child support arrears, or other wage garnishments that will affect their wages. Staff assist families in applying for government benefits such as Social Security Income (SSI), Social Security Disability Income (SSDI), Unemployment, and Pension.

The Arizona Self-Sufficiency Matrix is a qualitative assessment tool that evaluates features of our client's lives. This assessment tool covers several different domains, each ranked on a scale of 1 (In Crisis) to 5 (Empowered). **Outcomes for employment are ranked as follows:** 1 = No Job; 2 = Temp job, no benefits; 3 = Full-time, no benefits; 4 = Full-time, adequate pay with benefits; 5 = Level 4 job is maintained (6-month follow-up). The Matrix is administered when clients begin participation in the program and again at 6 and 12-month intervals until program completion. Screening: There are no screening processes because all are eligible to receive services.

3) *Describe the amount of contact each offender will receive from each type of service.*

| Service                              | Length of Session/Duration    | Details of Service  |
|--------------------------------------|-------------------------------|---|
| Learning To Earning (LTE) Assessment | One Visit lasting 1.5-2 hours | <u>Discuss Goals</u> -work related, financial, educational, basic needs. <u>Identify Barriers/Current Situation</u> (medical, family, convictions, disability, etc.) Use Motivational Interviewing, Arizona Self Sufficiency Matrix, MAACLink |
| Résumé Assistance                    | 30-90 minutes                 | Assistance to develop, edit or polish résumé  |
| Job Coaching (with client            | Meetings last 15-30 minutes.  | Assisting the client with their search for appropriate job openings. Provide Interview preparation. Answer questions  |

| Service  | Length of Session/Duration   | Details of Service  |
|--|--|---|
| and assigned Case Manager)   | Number of meetings vary-many come in multiple times per week                                 | about job openings, create job log to track follow up calls, feedback on applications, and interviews. Case managers work with clients on educational goals which allow them to obtain more stable, higher-wage employment.   |
| MLM Computer Lab/Phone Banks   | Typically, four hours per session on computer and 1 hour on phones. 10-20 sessions.          | Develop their résumés, search for jobs, and apply for jobs. Make follow-up calls with employers and to schedule interview appointments. Client's computer skills are assessed and assistance is provided.   |
| Financial literacy support (available to interested clients)                   | 1-2 hour sessions. Average of 5 sessions.  | Case managers help clients develop a budget which prioritizes shelter, food, and transportation to and from work. Clients are coached on the best methods to use conventional banking system, address significant debts related to child support, judgments, and wage garnishments, pay past due medical and utility bills, and student loans, setting goals to save for emergencies, and how to repair their credit rating.  |
| Other Supportive Services through Family Empowerment Continuum case management | Weekly for the first month, then bi-weekly or monthly, depending on the needs of the client. | Bus passes for transportation to interviews, food through access to one of MLM's food pantries or lunches while they are in the Computer Lab. Families receive 21 meals per month from the pantry. Help obtaining Birth Certificates and proper identification. Clothing for job interviews and phone cards. If the offender's family is in need, MLM partners with Happy Bottoms to provide diapers and Giving the Basics for hygiene products. To get clients on their feet after just starting a job, MLM provides assistance with rent or utility deposits, rent, or back utility payments. Clients can also request help with minor home repair and home weatherization. |

The number of days it takes each offender to become employed depends upon how quickly they complete their résumé, their level of computer skills, the number of job openings they apply for at each visit, and whether they know what type of job for which they want to apply. Those who self-identify as being part of a particular profession (workman, painter, cook, etc.) and who know what type of job they are looking for will typically spend less than a month looking for work before they are able to find employment. Those without specific skill sets but who are open to any type of employment will typically find work in data entry, retail, fast/casual restaurants, as a dietary aide

in a nursing home, in housekeeping, as a janitor, in a warehouse, or completing order fulfillment. For these individuals, it typically takes one to three months to find employment. Those who have felonies, many firings, mental physical issues, dentistry issues, or difficulty with social skills typically take three months or longer to find employment.

4) *Describe the target audience, verification, and identify the process for referrals.*

The target audience for this program will be offenders from the Department of Corrections Kansas City Community Release Center and the Western Missouri Correctional Center. Verification of client's identification, offender status, and need will be documented by the Learning to Earning staff in cooperation with the Community Release Center Probation and Parole Officers. Data recorded in MAACLink includes the date of service, type of service received, and the completion of particular outcomes, such as résumé completion, life skills training, employment obtained, and employment maintained. The LTE program estimates 56 percent of the population it serves to be homeless as reported by the MAACLink database. *"Joe" came to MLM as a recently released inmate with a felony history. Joe had no transportation, no housing and no job, but with the support of Learning to Earning, Joe found a job earning \$200/week and staff began to work with him on a budget. As Joe's family saw his progress, they gave him access to a car, allowing him to obtain higher wage employment. Joe worked to repair his credit through small dollar loans and a secured credit card. Joe now works full time, earns a good wage, has full benefits, and is truly empowered to be self-sufficient.*

**Preference Points (10 points):** *Service Supported Housing (5 points) Sex Offender Housing (5 points)* Clients receiving services from Metro Lutheran Ministry's Learning to Earning program (a part of the Family Empowerment Continuum) may also need housing assistance. For those in need, MLM and the program work to improve families' housing, financial, employment, and

food stability. Emergency assistance is available to address the immediate needs of families to keep the lights on, their houses warm, and roofs over their heads for those suffering from unexpected crises and poverty. Those who need to find stable housing receive assistance with housing search and placement, assessment of housing barriers, needs and preferences, development of housing action plan, housing search, owner negotiation, assistance with rental applications and understanding leases, assistance with obtaining utilities and making moving arrangements, and tenant counseling. The goal of these services will be to get former inmates into housing as quickly as possible and provide the case management needed to connect them to mainstream resources while eliminating barriers and offering developmental training to prevent them from future homelessness.

Case managers help clients develop goals for housing stability including safe locations where families can develop relationships with their neighborhood. MLM also understands and has experience in meeting the housing needs of clients and felons who may be sex offenders, recovering addicts or are otherwise difficult to house. The agency has a wide array of landlord contacts as well as contacts with transitional housing programs, sober living facilities, and housing willing to take sex offenders. While in housing, staff will assess strengths and weaknesses toward them becoming fully independent. Services may include application of state and/or federal benefits, social skill development, referrals for substance abuse and/or mental health treatment, and other wrap around services needed. The case manager will monitor and review progress and achievements regularly to ensure continued success. In 2016, overall MLM helped: 476 households, with 597 children with utility assistance (gas, electricity, and water); and 435 households, with 511 children with housing assistance thus avoiding homelessness (rent, deposits, temporary lodging). This is a 40% increase over 2015.

**Funding Sources – See Checklist for Application Submission**

**Applicant's Experience and Expertise (20 points):**

*b. Describe past working relationships with Probation and Parole in detail.*

Metro Lutheran Ministry works most with the following:

Administrators

- Azell Banoza (Reentry Coordinator) 816-842-7467 x.231
- Michele McAfee (Institutional Parole Officer): 816-632-1390
- Arthur Diaz (Gateway Foundation): 816-716-3174
- Jeremy Liakos (District 4C - District Administrator): 816-292-7148
- Major Bryant Holmes 816-842-7467 x.246
- Janet Reed (Unit Supervisor) 816-7467 x.284

Probation and Parole Officers

- Lionell Thomas (Probation and Parole Officer) 816-842-7467 x.250
- Rue Ann Miller (Probation and Parole Officer) 816-842-7467 x.245
- Hope Harris (Probation and Parole Officer) 816-842-7467 x.235
- William Gaughan (Probation and Parole Officer) 816-842-7467
- Terri Godsey (Probation and Parole Officer): 816-842-7467 ext 232
- Dave Leyerle (Probation and Parole Officer): 816-482-5882

Probation and Parole staff refer clients to Learning to Earning. In addition, staff work with MLM staff to find appropriate housing, referrals for substance abuse and/or mental health treatment and other wrap around services.

A relationship with the Kansas City Re-Entry Center began when it was formerly the Kansas City Community Release Center. Currently, the Re-Entry Center has a group of inmates

on work release who have some income, however due to intervention fees they typically need assistance saving money to get into permanent housing. Many have a home plan that includes a homeless shelter or transitional living facility and which also requires further employment assistance to help them access permanent housing. On occasion, a Probation and Parole Officer (such as Dave Leyerle) visits Learning to Earning to learn more about the services their parolee receives from MLM. Several years ago, this grew into a relationship with the Second Chance program and Brittany Peterson, who reached out to us to provide services that they were unable to provide because of funding constraints. Because of the reputation staff have with working with offenders living in transitional housing, Learning to Earning also receives many consumer-directed referrals coming out of these housing situations. Over the course of the last two years, staff have interacted with over 100 individuals on probation or parole.

- c. *Describe the organization and its capabilities to implement the project.* See Exhibit A
- d. *Describe the competencies of the staff assigned to the project.* See Exhibit B
- e. *Current or past legal actions, suits or proceedings.* See Exhibit C
- f. *Canceled contracts with other governmental and/or private entities* See Exhibit C
- g. *The applicant should demonstrate experience with the target population.*

Over the last 46 years, Mero Lutheran Ministry (MLM) has pioneered new and innovative emergency assistance and housing programs that have become successful, separate non-profits. MLM's Community Assistance Centers, located in Jackson and Clay counties in Missouri and Wyandotte County in Kansas, seek to assist low-income families and individuals in meeting the challenges of day-to-day living, resolve immediate crises, and prevent future crises. Our holistic approach to services and programs remedy the immediate need for food, clothing, shelter, utilities, and transportation. Strengths and outcomes-based counseling, coaching and case management

guide receptive clients towards greater independence and self-reliance. In 2016, MLM provided assistance to 20,201 unduplicated individuals. Through our last grant award from the Department of Corrections, MLM was able to house over 15 individuals and interacted with over 50 individuals who were looking for assistance with the re-entry process. Several of those relationships extended out past the grant period and we continue to provide support to all of the individuals we meet who are under community supervision.

MLM differentiates itself with its unique Family Empowerment Continuum (FEC), providing a year-long case management, wrap-around services with five years follow up. MLM gives clients a clear path to income self-sufficiency through a continuum of care that immediately addresses short term stability and eventually helps clients to achieve lasting and long-term sustainability. In 2016: Programs fed 6,000 households; 1,000 households received housing safety and stability assistance; 88 households received year-long case management, a 30% increase over 2015. This program has a 90% housing success rate; 1,162 individuals sought assistance to attain employment through the Learning to Earning Program, over 300 of which were offenders, and 265 individuals attained employment. Outcome data indicates families contacted one year after service are exceeding the program goals for food security, transportation, income, and housing. In addition, MLM's standard is 90% customer satisfaction, however, a rating of 97% was achieved in the current year.

**Core Performance Measures (10 points):** See Exhibit D **Timeline (5 points):** See Exhibit E.

**Budget Detail (15 points):** See Exhibit F. **Budget Narrative (15 points):** See Exhibit G.

Metro Lutheran Ministry attests that the prices quoted in the application are fair and are not tainted by collusion, conspiracy, connivance, or other unlawful practice on the part of the applicant or any of its agency, representatives, owners, employees, or parties of interest.

**EXHIBIT A**

**SUBMISSION IS MANDATORY**

**PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

|  |  |
|--|--|
| <b>Organization Name:</b>                                    | Metro Lutheran Ministry  |
| <b>Reference Information (Prior Services Performed For:)</b> |  |
| <b>Name of Reference Company:</b>                            | Probation and Parole   |
| <b>Address of Reference Company:</b>                         | 1730 Prospect, 2nd Floor<br>Kansas City, MO  |
| <b>Reference Contact Person Name:</b>                        | David Leyerle  |
| <b>Contact Person Phone #:</b>                               | 816-482-5882   |
| <b>Contact Person e-mail address:</b>                        | Dave.leyerle@doc.mo.gov  |
| <b>Dates of Prior Services:</b>                              | 2013-Present, Ongoing  |
| <b>Dollar Value of Prior Services:</b>                       | Direct client support: \$15,000<br>Includes: Bus fare (single ride and monthly), Work Clothing, Cellular telephones for job search, other job readiness items, housing deposits, and apartment furniture.  |
| <b>Description of Prior Services Performed:</b>              | Assist Clientele with job search activities. Vocational services include resume assistance, job counseling, and soft skill job readiness training. Provide financial supports including transportation assistance, identification documents, work clothing, and other job readiness materials including cellular telephones for employment searches. |

  
Authorized Signature of Applicant

6-15-17  
Date



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**PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

|  |  |
|--|--|
| <b>Organization Name:</b>                                    | Metropolitan Lutheran Ministry   |
| <b>Reference Information (Prior Services Performed For:)</b> |  |
| Name of Reference Company:                                   | Gateway Foundation   |
| Address of Reference Company:                                | 4049 Pennsylvania Avenue   |
|  | Kansas City, MO 64111  |
| Reference Contact Person Name:                               | Arthur Diaz  |
| Contact Person Phone #:                                      | 816-716-3174   |
| Contact Person e-mail address:                               | <a href="mailto:axdiaz@gatewayfoundation.org">axdiaz@gatewayfoundation.org</a>   |
| Dates of Prior Services:                                     | 2016-current   |
| Dollar Value of Prior Services:                              | Direct client support: \$15,000<br>Includes: Bus fare (single ride and monthly), Work Clothing, Cellular telephones for job search, other job readiness items, housing deposits, and apartment furniture.  |
| Description of Prior Services Performed:                     | Assist Clientele with job search activities. Vocational services include resume assistance, job counseling, and soft skill job readiness training. Provide financial supports including transportation assistance, identification documents, work clothing, and other job readiness materials including cellular telephones for employment searches. |

\_\_\_\_\_  
Authorized Signature of Applicant

6-15-17  
Date

**EXHIBIT A**

**SUBMISSION IS MANDATORY**

**PRIOR EXPERIENCE OF APPLICANT**

The applicant shall copy and complete this form for each reference being submitted as demonstration of the applicant's prior experience. In addition, the applicant is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

|  |   |
|--|---|
| <b>Organization Name:</b>                                    | Metro Lutheran Ministry   |
| <b>Reference Information (Prior Services Performed For:)</b> |   |
| Name of Reference Company:                                   | Corizon Health  |
| Address of Reference Company:                                | 651 Mulberry<br>Kansas City, MO 64101   |
| Reference Contact Person Name:                               | Azell Banoza  |
| Contact Person Phone #:                                      | 816-842-7467 ext 231  |
| Contact Person e-mail address:                               | Azell.Banoza@doc.mo.gov   |
| Dates of Prior Services:                                     | 2014-Present, Ongoing   |
| Dollar Value of Prior Services:                              | Direct client support: \$15,000 Annually<br>Includes: Bus fare (single ride and monthly), Work Clothing, Cellular telephones for job search, other job readiness items, housing deposits, and apartment furniture.  |
| Description of Prior Services Performed:                     | Assist Clientele in pre/post release especially in relation to the KCCRC Honor Center and transitional living arrangements in the community. Direct service provided to ex-offenders includes financial support, housing support, employment readiness, and counseling. Offers direct financial support to ex-offenders including work clothing, transportation assistance, identification documents, cellular telephones for contact with employers. |

Authorized Signature of Applicant

Date

6-15-17

**EXHIBIT B**  
**SUBMISSION IS MANDATORY**

**EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

| <b>Title of Position: <u>Family Empowerment Continuum Coordinator</u></b>   |  |
|---|--|
| <b>Name of Person:</b>  | Ashley Marmon  |
| <b>Educational Degree (s):</b> include college or university, major, and dates  | Bachelor of Social Work, University of Central Missouri, May 2017; Masters of Social Work, University of Kansas, May 2019  |
| <b>License(s)/Certification(s),</b> Number(s), expiration date(s), if applicable:   | N/A  |
| <b>Specialized Training Completed.</b> Include dates and documentation of completion for all required training identified in this document: | N/A  |
| Number of years experience in area of service proposed to provide. Experience in working with offenders?                                    | 6 months providing employment support, life skills coaching, using motivational interviewing to assist clients (including offenders) as they work to achieve economic stability.         |
| Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.     | Employee; Program Coordinator, employed for 6 months.  |
| Describe this person's responsibilities over the past 12 months.  | Working as a job developer and case manager to clients.  |
| Previous employer(s), positions, and dates.   | N/A  |
| Identify specific information about experience in:  |  |
| ✓ Social Work   | Assist clients achieve economic stability, direct clients to appropriate resources, provide life skills coaching, provide employment support; manage client case files and documentation |
| ✓ Reentry   | My exposure to working with the reentry population is mostly limited to my 6 months spent assisting with case management at Metro Lutheran Ministry                                      |
| ✓ Counseling  | My experience with counseling is mostly limited to my 6 months spent assisting with case management at Metro   |

|   |  |
|---|--|
| <b>Title of Position: <u>Family Empowerment Continuum Coordinator</u></b> |  |
|   | Lutheran Ministry  |
| ✓ Criminal Justice  | Working with Metro Lutheran Ministry, we have worked with the Re-Entry population at KCCRC, the BOP facility in KC, MO located on Campbell St, and with the Re-Entry community coalition.  |
| ✓ Correctional Residential Facilities                                     | We work, at Metro Lutheran Ministry, with individuals who are living in transitional living arrangements, funded through the voucher system provided by Dismas House, as well as individuals staying at KCCRC, and those staying at various Oxford Houses, Sober Living arrangements, within other community resources such as Emergency Shelters. |

  
 Authorized Signature of Applicant

6-15-17  
 Date

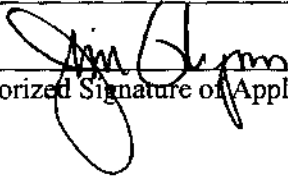
**EXHIBIT B**  
**SUBMISSION IS MANDATORY**

**EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

|   |  |
|---|--|
| <b>Title of Position:</b> <u>Learning to Earning Program Manager</u>  |  |
| <b>Name of Person:</b>  | Jacob Bosch  |
| <b>Educational Degree (s):</b> include college or university, major, and dates  | University of Kansas, Bachelor's of Arts: Philosophy, History 2005<br>University of Aalborg, Denmark, Master of Arts: English and Culture and Media Studies, 2007  |
| <b>License(s)/Certification(s),</b> Number(s), expiration date(s), if applicable:   | N/A  |
| <b>Specialized Training Completed.</b> Include dates and documentation of completion for all required training identified in this document: | N/A  |
| Number of years experience in area of service proposed to provide. Experience in working with offenders?                                    | Over eight years of experience working in the proposed area of service.<br>All of these years were spent working with offenders.   |
| Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.     | Employee, Program Manager 4 years, 3 months.   |
| Describe this person's responsibilities over the past 12 months.  | Oversees all aspects of the program including direct service, grant proposals and reporting, asset allocation, and staff management.   |
| Previous employer(s), positions, and dates.   | ISGKC, 2007-8, Language Arts Teacher<br>Area Vocational Colleges, 2008-2012, Post Secondary Instructor   |
| Identify specific information about experience in:  | Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience   |
| ✓ Social Work   | 2013-2015 - Manage social service program serving Re-Entry, Veteran, Homeless and Low and Moderate income clients. Engaged with community groups including Re-Entry Coalition, Alliance for Economic Inclusion, Homelessness Coalition and Employment Coalition, Troost Alliance, and Missouri Association for Social Welfare. (2013-Present). Community activities focused on personal finance, employment trends and workforce development keep Jacob aware of local trends. |

| Title of Position: <u>Learning to Earning Program Manager</u> |   |
|---|---|
| ✓ Reentry   | Served students in VO-Tech environment with criminal barriers - 4 years (2008-2012). 2+ Years managing Metro Lutheran Ministry's Learning to Earning Program, with an emphasis on clients with criminal histories (2013-Present)                    |
| ✓ Counseling  | 2+ years providing counseling of a vocational, attitudinal, motivational, and financial variety to a population with significant life barriers  |
| ✓ Criminal Justice  | Interaction with Criminal Justice Degree program students (2008-2012). Work with clients who have criminal histories that include but are not limited to Registered Sex Offenders, Violent Offenders, Drug Offenders, and Property Crime Offenders. |
| ✓ Correctional Residential Facilities                         | Interacts on a daily basis with clients living in KCCRC, BOP facilities, Oxford Houses, Transitional Sober Living, and Emergency Shelters. Provide direct service to these clients as a job coach, financial coach, counselor, and advocate.        |

  
 Authorized Signature of Applicant

6-15-17  
 Date

**EXHIBIT C**

**SUBMISSION IS MANDATORY**

**LEGAL/CANCELLATION ACTIONS AGAINST APPLICANT**

The applicant shall copy and complete this form for each legal action or cancellation of contract brought against the organization in the past 5 years. In addition, the applicant is advised that if such information is obtained by Department that is not included in the application, the application may not be considered.

|   |                         |
|---|-------------------------|
| <b>Organization Name:</b>                           | Metro Lutheran Ministry |
| <b>Legal/Cancellation Actions Information From:</b> |                         |
| Name of Company:                                    | NONE                    |
| Address of Company:                                 |                         |
| Contact Person Name:                                |                         |
| Contact Person Phone Number:                        |                         |
| Contact Person e-mail address:                      |                         |
| Date(s) of Legal Action or Cancellation:            |                         |
| Reason for Cancellation of Contract:                |                         |
| Description of Legal Action:                        |                         |
| Resolution of Legal Action:                         |                         |

\_\_\_\_\_  
Authorized Signature of Applicant

6-15-17  
\_\_\_\_\_  
Date

**Exhibit D**  
**Performance Measures**

**Total Number of Clients Agency Proposes to Serve:** 30

| <b>Category</b>                    | <b>Service</b>                              | <b>Proposed Clients</b> | <b>Outcome</b>               | <b>Indicator</b><br>(How do you know you are achieving the outcome?)   |
|------------------------------------|---|-------------------------|------------------------------|--|
| Academic                           | Educational Counseling                      | 30                      | Enhanced education           | 100% of clients who express an interest in furthering their education to increase their employment readiness will receive educational counselling.   |
|                                    |   |                         |                              |  |
| Basic Needs and Emergency Services | Food  | 30                      | Attainment of basic needs    | 100% of clients who express a basic need will have that need addressed.  |
|                                    | ID's  | 30                      |                              |  |
|                                    | Utility deposits                            | 10                      |                              |  |
| Employment                         | Resume/Cover Letter Assistance              | 75                      | Improved employment          | 50% of clients enrolled in the program will find full time employment.<br><br>100% of clients enrolled in the program will attain employment sufficient to acquire housing.<br><br>60% of clients enrolled in the program will maintain adequate employment to maintain housing. |
|                                    | Application assistance                      | 100                     |                              |  |
|                                    | Job Counseling                              | 150-200                 |                              |  |
|                                    | Work Clothing                               | 30                      |                              |  |
| Family                             |   |                         | Increased family support     |  |
|                                    |   |                         |                              |  |
| Housing                            | Rental Assistance                           | 30                      | Attainment of housing        | 100% of clients enrolled in the program will attain permanent housing.   |
| Mental Health                      |   |                         | Reduced mental health risks  |  |
|                                    |   |                         |                              |  |
| Substance Abuse                    |   |                         | Reduced substance abuse      |  |
|                                    |   |                         |                              |  |
| Transportation                     | Bus Passes/Transportation to Job Interviews | 30                      | Attainment of transportation | 100% of clients who express a transportation need will have that need addressed.   |
|                                    |   |                         |                              |  |
| Vocational                         |   |                         | Improved employment          |  |
|                                    |   |                         |                              |  |



**EXHIBIT E**

**SUBMISSION IS MANDATORY**

**TIMELINE**

The applicant shall complete this form to include each detailed step that will need to be taken to implement the project and to provide services during the entire contract period.

| <b>Task or Event</b>  | <b>Start Date</b> | <b>Date to be Completed</b> | <b>Assigned Personnel</b> |
|---|-------------------|-----------------------------|---------------------------|
| Contact PPOs to let them know funding availability and timeline   | 8/1/2017          | 9/1/2017                    | Bosch                     |
| Recruiting  | 8/1/2017          | 11/1/2017                   | Bosch                     |
| Daily intake and ongoing meetings with clients  | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Basic Needs (Food, IDs)   | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Applications for benefits, referrals for treatment and other wrap around services   | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Soft Skills and Work Readiness  | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Material Considerations (clothing, transportation)  | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Jobs Placements   | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Housing Placements  | 9/1/2017          | 11/30/2017                  | Bosch, Marmon             |
| Entry level job fair specific to at-risk, reentry, homeless, and veteran at Metropolitan Community College  | Late August 2017  | Late August 2017            | Bosch, Marmon             |
|   |                   |                             |                           |
| Learning to Earning anticipates continuing to serve these clients and additional clients with these services after funding concludes June 30, 2018. |                   |                             |                           |
|   |                   |                             |                           |
|   |                   |                             |                           |
|   |                   |                             |                           |
|   |                   |                             |                           |

**EXHIBIT F**

**SUBMISSION IS MANDATORY**

**BUDGET DETAIL WORKSHEET**

*All Expenses Must Be Reasonable and Necessary*

| <b>COMPLETED FORM MUST BE RETURNED WITH APPLICATION</b>  |   |                 |
|--|---|-----------------|
| <b>A. Personnel (a breakdown in the number of hours each person is dedicated to the project is to be provided)</b>                   |   |                 |
| <b>Name/Position</b>   | <b>Calculation of Cost</b>                    | <b>Cost</b>     |
|  |   |                 |
|  |   |                 |
|  |   |                 |
|  | <b>Subtotal</b>                               |                 |
| <b>B. Fringe Benefits (must be capped at 12%)</b>  |   |                 |
| <b>Name/Position</b>   | <b>Calculation of Cost</b>                    | <b>Cost</b>     |
|  |   |                 |
|  |   |                 |
|  | <b>Subtotal</b>                               |                 |
| <b>C. Staff Travel (mileage at \$0.37 /mile -- Conus rate for any other expenses)</b>  |   |                 |
| <b>Purpose of Staff Travel (all staff travel must be for the <u>direct</u> benefit of the offender -- include location and type)</b> | <b>Calculation of Cost</b>                    | <b>Cost</b>     |
|  |   |                 |
|  |   |                 |
|  | <b>Subtotal</b>                               |                 |
| <b>D. Direct Services (i.e. housing rental/lease, GED Testing)</b>   |   |                 |
| <b>****ALL DIRECT SERVICES MUST BE PROVIDED TO THE OFFENDERS****</b>   |   |                 |
|  | <b>Calculation of Cost</b>                    | <b>Cost</b>     |
| <i>Client rental and deposit assistance</i>  | 30 clients x approximately \$1,200 per client | \$36,000        |
| <i>Utility assistance</i>  | 10 clients x approximately \$500 per client   | \$5,000         |
| <i>Other assistance (including bus passes, Birth certificates, ID's, and work clothes)</i>   | 30 clients x approximately \$300 per client   | \$9,000         |
|  | <b>Subtotal</b>                               | <b>\$50,000</b> |

| E. Equipment/Supplies (Direct Services Only) | Calculation of Cost | Cost            |
|--|---------------------|-----------------|
|  |                     |                 |
|  |                     |                 |
|  |                     |                 |
|  |                     |                 |
|  |                     |                 |
|  | <b>Subtotal</b>     |                 |
|  |                     |                 |
| <b>Summary</b>                               |                     |                 |
| A. Personnel                                 |                     |                 |
| B. Fringe Benefits                           |                     |                 |
| C. Staff Travel                              |                     |                 |
| D. Direct Services                           |                     |                 |
| E. Equipment/Supplies (Direct Services Only) |                     |                 |
|  |                     |                 |
|  |                     |                 |
| <b>TOTAL PROJECT COSTS</b>                   |                     | <b>\$50,000</b> |

By signing below, the applicant hereby declares understanding, agreement and certification of compliance to provide the services or project in accordance with all the requirements and specifications contained herein and in the Terms and Conditions. The applicant further agrees that the language of this RFA shall govern in the event of a conflict of terms with his/her application.

Applicant Company Name Metro Lutheran ministry

Authorized Signature of Applicant Jim Glynn Date 6-15-17

Printed Name Jim Glynn

**EXHIBIT C**

**SUBMISSION IS MANDATORY**

**BUDGET NARRATIVE**

**Applicant must provide justification and detailed description of all budget items listed in Exhibit E. NOTE: All expenses must be reasonable and necessary.**

**A. Personnel**

None Requested, please see In-Kind attachment

**B. Fringe Benefits**

None Requested, please see In-Kind attachment

**C. Staff Travel**

None

**D. Direct Services to the Offenders**

Through these grant funds, MLM will be able to provide reentry clients with complete wrap around services to ensure their success. MLM provides housing assistance, transportation assistance, food pantry assistance, and other work readiness assistance to offenders.

Community Reentry funding will be used to provide offenders with rent and rent deposit assistance (30 clients), utility assistance (10 clients) and other support (30 clients) such as transportation (bus passes), birth certificates, ID's and work clothes. These direct services are critical to the success of our clients in meeting their employment goals and finding lasting stability.

**E. Equipment/Supplies (Direct Services Only)**

None

## EXHIBIT J

### BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION, AND AFFIDAVIT OF WORK AUTHORIZATION

**BUSINESS ENTITY CERTIFICATION:** The applicant must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

- BOX A:** To be completed by a non-business entity as defined below.
- BOX B:** To be completed by a business entity who has not yet completed and submitted documentation pertaining to the federal work authorization program as described at [http://www.dhs.gov/files/programs/gc\\_1185221678150.shtm](http://www.dhs.gov/files/programs/gc_1185221678150.shtm).
- BOX C:** To be completed by a business entity who has current work authorization documentation on file with a Missouri state agency including Division of Purchasing and Materials Management.

**Business entity**, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "business entity" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "business entity" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term "business entity" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo. Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

#### **BOX A - CURRENTLY NOT A BUSINESS ENTITY**

I certify that \_\_\_\_\_ (Company/Individual Name) **DOES NOT CURRENTLY MEET** the definition of a business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above, because: (check the applicable business status that applies below)

- ☐ - I am a self-employed individual with no employees; **OR**
- ☐ - The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

I certify that I am not an alien unlawfully present in the United States and if \_\_\_\_\_ (Company/Individual Name) is awarded a contract for the services requested herein under \_\_\_\_\_ (RFA Number) and if the business status changes during the life of the contract to become a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo then, prior to the performance of any services as a business entity, \_\_\_\_\_ (Company/Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the Division of Purchasing and Materials Management with all documentation required in Box B of this exhibit.

\_\_\_\_\_  
Authorized Representative's Name (Please Print)

\_\_\_\_\_  
Authorized Representative's Signature

\_\_\_\_\_  
Company Name (if applicable)

\_\_\_\_\_  
Date

**EXHIBIT J, continued**

**BOX B – CURRENT BUSINESS ENTITY STATUS**

I certify that Metro Lutheran Ministry (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

Thomas Daniels

Authorized Business Entity  
Representative's Name (Please Print)

[Signature]

Authorized Business Entity  
Representative's Signature

Metro Lutheran Ministry

Business Entity Name

6/15/17

Date

tdaniels@mlmkc.org

E-Mail Address

As a business entity, the applicant must perform/provide each of the following. The applicant should check each to verify completion/submission of all of the following:

- ☐ - Enroll and participate in the E-Verify federal work authorization program (Website: [http://www.dhs.gov/files/programs/gc\\_1185221678150.shtm](http://www.dhs.gov/files/programs/gc_1185221678150.shtm); Phone: 888-464-4218; Email: [e-verify@dhs.gov](mailto:e-verify@dhs.gov)) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- ☒ - Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the applicant's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the applicant's name and the MOU signature page completed and signed, at minimum, by the applicant and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the applicant's name and company ID, then no additional pages of the MOU must be submitted;

AND

- ☐ - Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

**EXHIBIT J, continued**

**AFFIDAVIT OF WORK AUTHORIZATION:**

The applicant who meets the section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now MetroLutheran Ministry <sup>Thomas Daniels</sup> (Name of Business Entity Authorized Representative) as Finance Director (Position/Title) first being duly sworn on my oath, affirm MetroLutheran Ministry (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that MetroLutheran Ministry (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

*In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)*

[Signature]  
Authorized Representative's Signature

Thomas W Daniels  
Printed Name

Finance Director  
Title

6/15/17  
Date

tomdaniels@mlmkc.org  
E-Mail Address

191335  
E-Verify Company ID Number

Subscribed and sworn to before me this 15 of June. I am  
(DAY) (MONTH, YEAR)

commissioned as a notary public within the County of Jackson, State of  
(NAME OF COUNTY)

MO, and my commission expires on 4-7-2020.  
(NAME OF STATE) (DATE)

[Signature]  
Signature of Notary

6-15-17  
Date



JAMES D. GLYNN  
My Commission Expires  
April 9, 2020  
Jackson County  
Commission #12378718

**EXHIBIT J, continued**

*Complete the following if you are the E-Verify Administrator and are completing an Affidavit of Work Authorization for only one site with the State of Missouri. If completing Box C, do not complete Box B.*

**BOX C – AFFIDAVIT ON FILE – CURRENT BUSINESS ENTITY STATUS**

I certify that \_\_\_\_\_ (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the applicant's name and the MOU signature page completed and signed by the applicant and the Department of Homeland Security – Verification Division
- ✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

Name of **Missouri State Agency or Public University\*** to Which Previous E-Verify Documentation Submitted: \_\_\_\_\_

(\*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University – St. Louis; Missouri Southern State University – Joplin; Missouri Western State University – St. Joseph; Northwest Missouri State University – Maryville; Southeast Missouri State University – Cape Girardeau.)

**Date** of Previous E-Verify Documentation Submission: \_\_\_\_\_

Previous **Bid/Contract Number** for Which Previous E-Verify Documentation Submitted: \_\_\_\_\_  
(if known)

\_\_\_\_\_  
Authorized Business Entity  
Representative's Name (Please Print)

\_\_\_\_\_  
*Authorized Business Entity  
Representative's Signature*

\_\_\_\_\_  
Business Entity Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
E-Verify MOU Company ID Number

**FOR DEPARTMENT USE ONLY**

Documentation Verification Completed By:

\_\_\_\_\_  
Procurement Officer

\_\_\_\_\_  
Date





Company ID Number: 191335

## THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION MEMORANDUM OF UNDERSTANDING

### ARTICLE I

#### PURPOSE AND AUTHORITY

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Department of Homeland Security (DHS) and **Metro Lutheran Ministry** (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). This MOU explains certain features of the E-Verify program and enumerates specific responsibilities of DHS, the Social Security Administration (SSA), and the Employer. E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of the Employment Eligibility Verification Form (Form I-9). For covered government contractors, E-Verify is used to verify the employment eligibility of all newly hired employees and all existing employees assigned to Federal contracts.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). Authority for use of the E-Verify program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) (hereinafter referred to in this MOU as a "Federal contractor") to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

### ARTICLE II

#### FUNCTIONS TO BE PERFORMED

##### A. RESPONSIBILITIES OF SSA

1. SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all employees verified under this MOU and the employment authorization of U.S. citizens.
2. SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).

Company ID Number: 191335

4. SSA agrees to provide a means of automated verification that is designed (in conjunction with DHS's automated system if necessary) to provide confirmation or tentative nonconfirmation of U.S. citizens' employment eligibility within 3 Federal Government work days of the initial inquiry.

5. SSA agrees to provide a means of secondary verification (including updating SSA records as may be necessary) for employees who contest SSA tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of U.S. citizens' employment eligibility and accuracy of SSA records for both citizens and aliens within 10 Federal Government work days of the date of referral to SSA, unless SSA determines that more than 10 days may be necessary. In such cases, SSA will provide additional verification instructions.

## **B. RESPONSIBILITIES OF DHS**

1. After SSA verifies the accuracy of SSA records for aliens through E-Verify, DHS agrees to provide the Employer access to selected data from DHS's database to enable the Employer to conduct, to the extent authorized by this MOU:

- Automated verification checks on alien employees by electronic means, and
- Photo verification checks (when available) on employees.

2. DHS agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.

3. DHS agrees to provide to the Employer a manual (the E-Verify User Manual) containing instructions on E-Verify policies, procedures and requirements for both SSA and DHS, including restrictions on the use of E-Verify. DHS agrees to provide training materials on E-Verify.

4. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in the E-Verify program. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.

5. DHS agrees to issue the Employer a user identification number and password that permits the Employer to verify information provided by alien employees with DHS's database.

6. DHS agrees to safeguard the information provided to DHS by the Employer, and to limit access to such information to individuals responsible for the verification of alien employment eligibility and for evaluation of the E-Verify program, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security Numbers and employment eligibility, to enforce the Immigration and Nationality Act (INA) and Federal criminal laws, and to administer Federal contracting requirements.

7. DHS agrees to provide a means of automated verification that is designed (in conjunction with SSA verification procedures) to provide confirmation or tentative



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nonconfirmation of employees' employment eligibility within 3 Federal Government work days of the initial inquiry.

8. DHS agrees to provide a means of secondary verification (including updating DHS records as may be necessary) for employees who contest DHS tentative nonconfirmations and photo non-match tentative nonconfirmations that is designed to provide final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

### **C. RESPONSIBILITIES OF THE EMPLOYER**

1. The Employer agrees to display the notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system.

2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted regarding E-Verify.

3. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.

4. The Employer agrees that any Employer Representative who will perform employment verification queries will complete the E-Verify Tutorial before that individual initiates any queries.

A. The Employer agrees that all Employer representatives will take the refresher tutorials initiated by the E-Verify program as a condition of continued use of E-Verify, including any tutorials for Federal contractors if the Employer is a Federal contractor.

B. Failure to complete a refresher tutorial will prevent the Employer from continued use of the program.

5. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:

- If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.
- If an employee presents a DHS Form I-551 (Permanent Resident Card) or Form I-766 (Employment Authorization Document) to complete the Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The employer will use the photocopy to verify the photo and to assist DHS with its review of photo non-matches that are contested by employees. Note that employees retain the right to present any List A, or List B and List C, documentation to complete the Form I-9. DHS may in the future designate other documents that activate the photo screening tool.

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6. The Employer understands that participation in E-Verify does not exempt the Employer from the responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures, except for the following modified requirements applicable by reason of the Employer's participation in E-Verify: (1) identity documents must have photos, as described in paragraph 5 above; (2) a rebuttable presumption is established that the Employer has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of any individual if it obtains confirmation of the identity and employment eligibility of the individual in compliance with the terms and conditions of E-Verify; (3) the Employer must notify DHS if it continues to employ any employee after receiving a final nonconfirmation, and is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) the Employer is subject to a rebuttable presumption that it has knowingly employed an unauthorized alien in violation of section 274A(a)(1)(A) if the Employer continues to employ an employee after receiving a final nonconfirmation; and (5) no person or entity participating in E-Verify is civilly or criminally liable under any law for any action taken in good faith based on information provided through the confirmation system. DHS reserves the right to conduct Form I-9 compliance inspections during the course of E-Verify, as well as to conduct any other enforcement activity authorized by law.

7. The Employer agrees to initiate E-Verify verification procedures for new employees within 3 Employer business days after each employee has been hired (but after both sections 1 and 2 of the Form I-9 have been completed), and to complete as many (but only as many) steps of the E-Verify process as are necessary according to the E-Verify User Manual. The Employer is prohibited from initiating verification procedures before the employee has been hired and the Form I-9 completed. If the automated system to be queried is temporarily unavailable, the 3-day time period is extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability. In all cases, the Employer must use the SSA verification procedures first, and use DHS verification procedures and photo screening tool only after the SSA verification response has been given. Employers may initiate verification by notating the Form I-9 in circumstances where the employee has applied for a Social Security Number (SSN) from the SSA and is waiting to receive the SSN, provided that the Employer performs an E-Verify employment verification query using the employee's SSN as soon as the SSN becomes available.

8. The Employer agrees not to use E-Verify procedures for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use not authorized by this MOU. Employers must use E-Verify for all new employees, unless an Employer is a Federal contractor that qualifies for the exceptions described in Article II.D.1.c. Except as provided in Article II.D, the Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. The Employer understands that if the Employer uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its access to SSA and DHS information pursuant to this MOU.

9. The Employer agrees to follow appropriate procedures (see Article III. below) regarding tentative nonconfirmations, including notifying employees of the finding, providing written referral instructions to employees, allowing employees to contest the finding, and not taking

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adverse action against employees if they choose to contest the finding. Further, when employees contest a tentative nonconfirmation based upon a photo non-match, the Employer is required to take affirmative steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

10. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo non-match, does not establish, and should not be interpreted as evidence, that the employee is not work authorized. In any of the cases listed above, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status (including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, refusing to assign the employee to a Federal contract or other assignment, or otherwise subjecting an employee to any assumption that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo non-match or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 or OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

11. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA by not discriminating unlawfully against any individual in hiring, firing, or recruitment or referral practices because of his or her national origin or, in the case of a protected individual as defined in section 274B(a)(3) of the INA, because of his or her citizenship status. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the unfair immigration-related employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

12. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.

13. The Employer agrees that it will use the information it receives from SSA or DHS pursuant to E-Verify and this MOU only to confirm the employment eligibility of employees as

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authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords) to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

14. The Employer acknowledges that the information which it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)), and that any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

15. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, including by permitting DHS and SSA, upon reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a timely and accurate manner to DHS requests for information relating to their participation in E-Verify.

#### **D. RESPONSIBILITIES OF FEDERAL CONTRACTORS**

1. The Employer understands that if it is a Federal contractor subject to the employment verification terms in Subpart 22.18 of the FAR it must verify the employment eligibility of any "employee assigned to the contract" (as defined in FAR 22.1801) in addition to verifying the employment eligibility of all other employees required to be verified under the FAR. Once an employee has been verified through E-Verify by the Employer, the Employer may not reverify the employee through E-Verify.

a. Federal contractors not enrolled at the time of contract award: An Employer that is not enrolled in E-Verify as a Federal contractor at the time of a contract award must enroll as a Federal contractor in the E-Verify program within 30 calendar days of contract award and, within 90 days of enrollment, begin to use E-Verify to initiate verification of employment eligibility of new hires of the Employer who are working in the United States, whether or not assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within 3 business days after the date of hire. Once enrolled in E-Verify as a Federal contractor, the Employer must initiate verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

b. Federal contractors already enrolled at the time of a contract award: Employers enrolled in E-Verify as a Federal contractor for 90 days or more at the time of a contract award must use E-Verify to initiate verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within 3 business days after the date of hire. If the Employer is enrolled in E-Verify as a Federal contractor for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within 3 business days after the date of hire. An Employer enrolled as a Federal contractor in E-Verify must initiate verification of each employee assigned to the



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contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.

c. Institutions of higher education, State, local and tribal governments and sureties: Federal contractors that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), State or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency pursuant to a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. The provisions of Article II.D, paragraphs 1.a and 1.b of this MOU providing timeframes for initiating employment verification of employees assigned to a contract apply to such institutions of higher education, State, local and tribal governments, and sureties.

d. Verification of all employees: Upon enrollment, Employers who are Federal contractors may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only those employees assigned to a covered Federal contract. After enrollment, Employers must elect to do so only in the manner designated by DHS and initiate E-Verify verification of all existing employees within 180 days after the election.

e. Form I-9 procedures for Federal contractors: The Employer may use a previously completed Form I-9 as the basis for initiating E-Verify verification of an employee assigned to a contract as long as that Form I-9 is complete (including the SSN), complies with Article II.C.5, the employee's work authorization has not expired, and the Employer has reviewed the information reflected in the Form I-9 either in person or in communications with the employee to ensure that the employee's stated basis in section 1 of the Form I-9 for work authorization has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen). If the Employer is unable to determine that the Form I-9 complies with Article II.C.5, if the employee's basis for work authorization as attested in section 1 has expired or changed, or if the Form I-9 contains no SSN or is otherwise incomplete, the Employer shall complete a new I-9 consistent with Article II.C.5, or update the previous I-9 to provide the necessary information. If section 1 of the Form I-9 is otherwise valid and up-to-date and the form otherwise complies with Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired subsequent to completion of the Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.C.5, subject to any additional or superseding instructions that may be provided on this subject in the E-Verify User Manual. Nothing in this section shall be construed to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU, or to authorize verification of any existing employee by any Employer that is not a Federal contractor.

2. The Employer understands that if it is a Federal contractor, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.

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### **ARTICLE III**

#### **REFERRAL OF INDIVIDUALS TO SSA AND DHS**

##### **A. REFERRAL TO SSA**

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.

2. The Employer will refer employees to SSA field offices only as directed by the automated system based on a tentative nonconfirmation, and only after the Employer records the case verification number, reviews the input to detect any transaction errors, and determines that the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security Number to SSA for verification again if this review indicates a need to do so. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible after the Employer receives it.

3. If the employee contests an SSA tentative nonconfirmation, the Employer will provide the employee with a system-generated referral letter and instruct the employee to visit an SSA office within 8 Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

4. The Employer agrees not to ask the employee to obtain a printout from the Social Security Number database (the Numident) or other written verification of the Social Security Number from the SSA.

##### **B. REFERRAL TO DHS**

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must print the tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the tentative nonconfirmation.

2. If the Employer finds a photo non-match for an employee who provides a document for which the automated system has transmitted a photo, the employer must print the photo non-match tentative nonconfirmation notice as directed by the automated system and provide it to the employee so that the employee may determine whether he or she will contest the finding.

3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation received from DHS automated verification process or when the Employer issues a tentative nonconfirmation based upon a photo non-match. The Employer will determine whether the employee contests the tentative nonconfirmation as soon as possible





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after the Employer receives it.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will provide the employee with a referral letter and instruct the employee to contact DHS through its toll-free hotline (as found on the referral letter) within 8 Federal Government work days.

5. If the employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will provide the employee with a referral letter to DHS. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary. The Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo non-match, the Employer will send a copy of the employee's Form I-551 or Form I-766 to DHS for review by:

- Scanning and uploading the document, or
- Sending a photocopy of the document by an express mail account (furnished and paid for by DHS).

7. The Employer understands that if it cannot determine whether there is a photo match/non-match, the Employer is required to forward the employee's documentation to DHS by scanning and uploading, or by sending the document as described in the preceding paragraph, and resolving the case as specified by the Immigration Services Verifier at DHS who will determine the photo match or non-match.

#### **ARTICLE IV**

##### **SERVICE PROVISIONS**

SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access the E-Verify System, an Employer will need a personal computer with Internet access.

#### **ARTICLE V**

##### **PARTIES**

A. This MOU is effective upon the signature of all parties, and shall continue in effect for as long as the SSA and DHS conduct the E-Verify program unless modified in writing by the mutual consent of all parties, or terminated by any party upon 30 days prior written notice to the others. Any and all system enhancements to the E-Verify program by DHS or SSA, including but not limited to the E-Verify checking against additional data sources and instituting new verification procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes. DHS agrees to train employers on all changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual. Even without changes to E-Verify, DHS reserves the right to require employers to take

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mandatory refresher tutorials. An Employer that is a Federal contractor may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such a circumstance, the Federal contractor must provide written notice to DHS. If an Employer that is a Federal contractor fails to provide such notice, that Employer will remain a participant in the E-Verify program, will remain bound by the terms of this MOU that apply to non-Federal contractor participants, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.

B. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established procedures or legal requirements. The Employer understands that if it is a Federal contractor, termination of this MOU by any party for any reason may negatively affect its performance of its contractual responsibilities.

C. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as they may determine necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.

D. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.

E. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.

F. The Employer understands that the fact of its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to, Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

H. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively.



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To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

**Employer Metro Lutheran Ministry**

**Jim Glynn**

Name (Please Type or Print)

Title

***Electronically Signed***

Signature

**02/18/2009**

Date

**Department of Homeland Security – Verification Division**

**USCIS Verification Division**

Name (Please Type or Print)

Title

***Electronically Signed***

Signature

**02/18/2009**

Date



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### Information Required for the E-Verify Program

Information relating to your Company:

Company Name: Metro Lutheran Ministry

Company Facility Address: 3031 Holmes

Kansas City, MO 64109

Company Alternate  
Address:

County or Parish: JACKSON

Employer Identification

Number: 430970991

North American Industry  
Classification Systems

Code: 624

Parent Company: \_\_\_\_\_

Number of Employees: 10 to 19

Number of Sites Verified

for: 1

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

- MISSOURI 1 site(s)



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**Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:**

|                   |                           |             |                  |
|-------------------|---------------------------|-------------|------------------|
| Name:             | Hixson Denny              | Fax Number: | (816) 931 - 3511 |
| Telephone Number: | (816) 931 - 0027 ext. 236 |             |                  |
| E-mail Address:   | dennyhixson@mlmkc.org     |             |                  |

**Internal Revenue Service**

**Department of the Treasury**

**P. O. Box 2508  
Cincinnati, OH 45201**

**Date: June 7, 2002**

**Metropolitan Lutheran Ministry  
3031 Holmes  
Kansas City, MO 64109-1435**

**Person to Contact:**  
Shirley Rudolph 31-03949  
Customer Service Specialist  
**Toll Free Telephone Number:**  
8:00 a.m. to 8:30 p.m. EST  
877-829-5500  
**Fax Number:**  
513-263-3756  
**Federal Identification Number:**  
43-0970991

**Dear Sir or Madam:**

This letter is in response to your request for a copy of your organization's determination letter. This letter will take the place of the copy you requested.

Our records indicate that a determination letter issued in January 1975 granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Metropolitan Lutheran Ministry  
43-0970991

Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Code. If your organization is subject to this tax, it must file an income tax return on the Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your organization's present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

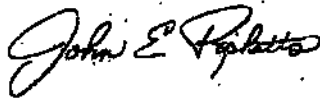
The law requires you to make your organization's annual return available for public inspection without charge for three years after the due date of the return. If your organization had a copy of its application for recognition of exemption on July 15, 1987, it is also required to make available for public inspection a copy of the exemption application, any supporting documents and the exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

Because this letter could help resolve any questions about your organization's exempt status and foundation status, you should keep it with the organization's permanent records.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

This letter affirms your organization's exempt status.

Sincerely,

A handwritten signature in dark ink, appearing to read "John E. Ricketts". The signature is fluid and cursive, with the first name "John" being the most prominent.

John E. Ricketts, Director, TE/GE  
Customer Account Services