

**NOTE:** The bidder/proposer shall, in determining the manner of MBE/WBE participation, must first consider involvement with MBE/WBE firms as joint venture partners, direct subcontractors, and suppliers of goods and services directly related to the performance of this contract. A service not directly related to the scope of services, but utilized during the bidder/proposer's normal course of business is considered indirect.

Additionally, all MBE/WBE firms included in this plan must be currently certified as such by at least one of the following agencies acknowledged by the City Colleges of Chicago (City of Chicago, Cook County, State of IL, Chicago Minority Supplier Development Council and regional affiliates and/or the Women's Business Development Center and its regional affiliates).

**Project Name& Number** Behavioral Nudging at MXC

In connection with the above referenced project I HEREBY DECLARE AND AFFIRM that I am a duly authorized representative of:  
Persistence Plus

(Company Name)  
Jill Frankfort [Signature]

(Printed Name and Signature of bidder/proposer's authorized representative)  
43 Soley Street, Charlestown, MA 02129

located at: \_\_\_\_\_  
(Address, City & Zip)

and I can reached at 617-337-2622 or via email at jill@persistenceplusnetwork.com  
(phone number)

**The certified MBE and WBE participants on this project include (attach additional sheets as necessary):**

Name of MBE/WBE Vendor: Persistence Plus	Street Address: 43 Soley Street	City, State & Zip: Charlestown, MA 02129
Contact Name: Jill Frankfort	Contact Title: President	Contact Phone: 617-337-2622
Contact Email: jill@persistenceplusnetwork.com	MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/> Supplier <input type="checkbox"/> (100% credit)	Certification Agencies: City of Boston
Contract \$: 85,000	Contract %: 100	Indirect Participation <input type="checkbox"/> Direct Participation <input checked="" type="checkbox"/>
Description of Services: 1) Design and deliver personalized mobile nudges to up to 6000 students in to increase persistence and success throughout 2021-22 2) Engage MXC faculty and staff in sustained professional development		

**SCHEDULE A**  
**MBE / WBE Goal Implementation Plan**

Name of MBE/WBE Vendor:	Street Address:	City, State & Zip:
Contact Name:	Contact Title:	Contact Phone:
Contact Email:	MBE <input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/>	Certification Agencies:
Contract \$:	Contract %:	Indirect Participation <input type="checkbox"/> Direct Participation <input type="checkbox"/>
Description of Services:		

Name of MBE/WBE Vendor:	Street Address:	City, State & Zip:
Contact Name:	Contact Title:	Contact Phone:
Contact Email:	MBE <input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/>	Certification Agencies:
Contract \$:	Contract %:	Indirect Participation <input type="checkbox"/> Direct Participation <input type="checkbox"/>
Description of Services:		

Name of MBE/WBE Vendor:	Street Address:	City, State & Zip:
Contact Name:	Contact Title:	Contact Phone:
Contact Email:	MBE <input type="checkbox"/> WBE <input type="checkbox"/> Supplier <input type="checkbox"/>	Certification Agencies:
Contract \$:	Contract %:	Indirect Participation <input type="checkbox"/> Direct Participation <input type="checkbox"/>
Description of Services:		

Total MBE Direct	\$ 0	% 0	Total MBE Indirect	\$ 0	% 0
Total WBE Direct	\$ 85,000	% 100	Total WBE Indirect	\$ 0	% 0

**Bidder/Proposer's M/WBE Liaison (if other than the submitter of the Schedule):**

(Please print—Name, phone & email address)

**Affidavit of Bidder/Proposer:**

I affirm that I have personally reviewed the material and facts set forth herein describing the Bidder/Proposer's plan to achieve the City Colleges of Chicago's MBE/WBE goals and that to the best of my knowledge the information contained herein is true and no material facts have been omitted. Additionally I understand that material misrepresentation will be grounds for contract termination if the Bidder/Proposer is so selected and will be subject to all laws relative to false statements.

On this 24 day of June, 2021, the  
President Persistence Plus  
 (Title of Affiant) (Name of Company)

appeared before me to acknowledge the execution of the terms contained herein.

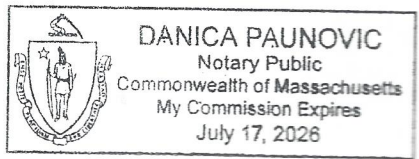
IN WITNESS WHEREOF, I HEREUNTO SET MY HAND AND OFFICIAL SEAL.

Danica Paunovic  
 (Signature of Notary Public)

My Commission Expires: July 17, 2026



(Seal)





# SCHEDULE D—WAIVER REQUEST

**NOTE:** Please refer to the attached instructions regarding the Good Faith Efforts required to support a waiver request.

To: City Colleges of Chicago Office of M/WBE Contract Compliance  
Re: Request for waiver from the City Colleges of Chicago MBE/WBE Contract Participation Plan

The undersigned respectfully requests a waiver of the City Colleges of Chicago's M/WBE Contract Participation Plan as detailed below. The request is made with the express understanding that the approval is not automatic and the circumstances and supporting documentation will be reviewed accordingly.

Project Name & Number: Behavioral Nudging at MXC

Type of waiver: Full MBE (25%)  Partial MBE (percentage to be waived)  \_\_\_\_\_ %  
Full WBE (7 %)  Partial WBE (percentage to be waived)  \_\_\_\_\_ %

- Reason for waiver:
- Sole Source Manufacturer
  - Distributor – No Subcontractors
  - Limited subcontracting opportunities
  - Other \_\_\_\_\_

Submitted by: Jill Frankfort, President  
Name and Title of authorized representative

Persistence Plus  
Name of Bidder/Proposer Company

**For CCC use only:**

Granted: Full MBE  Partial MBE  \_\_\_\_\_ % Full WBE  Partial WBE  \_\_\_\_\_ %

Denied:  Insufficient supporting documentation  Sufficient pool of direct M/WBE vendors

User Department concurrence (for scope issues): \_\_\_\_\_

CCO initials/date: \_\_\_\_\_ Compliance Director/date \_\_\_\_\_