

EXHIBIT B

QUALIFICATION AFFIRMATIONS

CONSULTANT INFORMATION	
Bidder:	_____

MINIMUM QUALIFICATIONS
<p><i>Please check all boxes that apply.</i></p> <p><input type="checkbox"/> Licensed to do business in the State of Washington. If not licensed, provide a written intent to become licensed in Washington within thirty (30) calendar days of being selected as the Apparent Successful Bidder.</p> <p><input type="checkbox"/> Knowledge of/experience with Washington's education system</p> <p><input type="checkbox"/> Experience facilitating team DEIB trainings with diverse participants.</p> <p>Consultants who do not meet the minimum qualifications noted above will be rejected as non-responsive and will not receive further consideration. Any proposal that is rejected as non-responsive will not be evaluated or scored.</p>

ADDITIONAL DESIRED QUALIFICATIONS
<p><i>Please check all boxes that apply.</i></p> <p><input type="checkbox"/> Knowledge of the historical context of educational system and its current impact federally and across Washington state.</p> <p><input type="checkbox"/> Ability to provide relevant examples of topics discussed.</p> <p><input type="checkbox"/> Ability to provide interactive activities to adults for learning.</p> <p><input type="checkbox"/> Ability to lead discussions with diverse audiences.</p>

I certify under penalty of perjury of the laws of the State of Washington that the foregoing is true and correct.

_____ Signature of Bidder	_____ Date	_____ Place Signed (City, State)
_____ Printed Name	_____ Title	_____ Organization Name