

DEPARTMENT OF SPECIAL SERVICES  
Township of Union Public Schools  
M - E - M - O - R - A - N - D - U - M

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TO: Pat Ditri  
FROM: Kim Conti  
RE: Board Agenda  
DATE: 4/30/2013

The committee recommends and I so move that the board approve the Jewish Vocational Center, 11 Prospect Street, East Orange, NJ 07017 to perform Vocational Evaluations at the rate of \$850 each for district students on an as needed basis not to exceed \$2550 for the remainder of the 2012-2013 school year from account 7074/11-000-219-320-01-19.



Howard Jacobs  
President

Dr. Leonard C. Schneider  
Executive Director

### School to Careers Fee Schedule

Short-Term (2 to 3 day) Vocational Evaluation	\$850
No Show Fee for Mobile Vocational Evaluation	\$60
Participation at IEP Meeting	\$250
Community Based Assessment	\$60 per hour
Job Placement Services	\$60 per hour
Job Coaching	\$60 per hour
Computer Skills Training (18 weeks)	\$4,000 (tuition)
Customer Service Skills Training (8 weeks)	\$2,000 (tuition)
Work Adjustment Training	\$75 per day
Career Center – Specialized Employment Readiness Training for students with ASD	\$100 per day
Career Camp for students diagnosed with an ASD	\$2850 (includes vocational evaluation)
Career Camp for students with mobility and/or cognitive impairments	\$2850 (includes vocational evaluation)

For more information, or to refer a candidate, please contact:

Lauren A. Klein  
Coordinator of Rehabilitation Services  
(973) 674-6330 Ext. 237  
TTY: (973) 674-4570  
Lklein@jvsnj.org

Effective 01/01/2012

111 PROSPECT STREET • EAST ORANGE, NJ 07017 • 973.674.6330 • FAX 973.674.3394 • VP 862.250.6055 • www.jvsnj.org



BUSINESS-TO-BUSINESS • EDUCATION, TRAINING & EMPLOYMENT • HEALTH & HUMAN SERVICES  
JVS is a Beneficiary Agency of Jewish Federation of Greater MetroWest NJ, a Member of the International Association of Jewish Vocational Services (IAJVS) and is Accredited by The Commission on Accreditation of Rehabilitation Facilities (CARF)



09/28/04

Taxpayer Identification# 221-487-229/000

Dear Business Representative:

Congratulations! You are now registered with the New Jersey Division of Revenue.

Use the Taxpayer Identification Number listed above on all correspondence with the Divisions of Revenue and Taxation, as well as with the Department of Labor (if the business is subject to unemployment withholdings). Your tax returns and payments will be filed under this number, and you will be able to access information about your account by referencing it.

Additionally, please note that State law requires all contractors and subcontractors with Public agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.


We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

If you have any questions or require more information, feel free to call our Registration Hotline at (609) 292-1730.

I wish you continued success in your business endeavors.

Sincerely,

  
John E. Tully, CPA  
Acting Director

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE		DEPARTMENT OF TREASURY DIVISION OF REVENUE P.O. BOX 252 TRENTON, NJ 08646-0252
TAXPAYER NAME: JEWISH VOCATIONAL SERVICE OF METROPOLITA	TRADE NAME:	
TAXPAYER IDENTIFICATION#: 221-487-229/000	SEQUENCE NUMBER: 0391123	
ADDRESS: 111 PROSPECT ST EAST ORANGE NJ 07017	ISSUANCE DATE: 09/28/04	
EFFECTIVE DATE: 07/01/66	 Acting Director	
FORM-BRC(08-01)	This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.	

# Request for Taxpayer Identification Number and Certification

Give Form to the  
 requester. Do not  
 send to the IRS.

Name (as shown on your income tax return)  
**Jewish Vocational Service**

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification (required):  
 Individual/sole proprietor  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_

Other (see instructions) ▶ \_\_\_\_\_

Address (number, street, and apt. or suite no.)  
**111 Prospect Street**

City, state, and ZIP code  
**East Orange, NJ 07017**

Requester's name and address (optional)

List account number(s) here (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

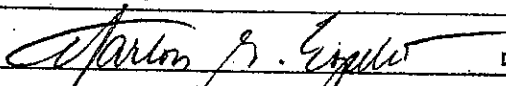
Social security number								
Employer identification number								
2	2	-	1	4	8	7	2	9

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification Instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶  Date ▶ \_\_\_\_\_

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

**BUSINESS ENTITY DISCLOSURE CERTIFICATION  
FOR NON-FAIR AND OPEN CONTRACTS**  
Required Pursuant to N.J.S.A. 19:44A-20.8  
TOWNSHIP OF UNION BOARD OF EDUCATION

Part I - Vendor Affirmation

The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that the \_\_\_\_\_ has not made and will not make any reportable contributions

(Name of Business)

pursuant to N.J.S.A. 19:44A-1et seq. that, pursuant to P.. 2004, c 19 would bar the award of this contract in the one-year period preceding \_\_\_\_\_ to any of the following named candidate

(Date Award is scheduled for approval)

committee, joint candidates committee; or political party committee representing the elected officials of the \_\_\_\_\_ as defined pursuant to N.J.S.A. 19:44A-3(p), (q) and (r).

(Name of entity of elected officials)

N/A	

Part II - Ownership Disclosure Certification

I certify that the list below contains the names and home addresses of all owners holding 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business entity:

- Partnership     Corporation     Sole Proprietorship     Subchapter S Corporation  
 Limited Partnership     Limited Liability Corporation     Limited Liability Partnership

Name of Stock or Shareholder	Home Address

Part III - Signature and Attestation

The undersigned is full aware that if I have misrepresented in whole or part this affirmation and certification, I and/or the business entity, will e liable for any penalty permitted under law.

Name of Business Entity Jewish Vocational Service

Signed [Signature]

Title Dir. of Rehab. Services

Printed Name Avi Dogin

Date 4/24/09

Subscribed and sworn before me this _____ Day of _____, 20 _____	_____ Affiant
Notary Public of the State of _____ My Commission Expires: _____	(Print name & title of Affiant)(Corporate Seal)



REVISED 2005

## EXHIBIT A

N.J.S.A. 10:5-36 et seq. N.J.A.C. 17:27

Mandatory Affirmative Action Language

(Goods, Professional Service and General Service Contracts)

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. Except with respect to affectional or sexual orientation, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. The contractor or subcontractor, where applicable, will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-36 et. Seq., as amended and supplemented from time to time and the Americans with Disabilities Act. The contractor or subcontractor agrees to make good faith efforts to employ minority and women workers consistent with the applicable county employment goals established in accordance with N.J.A.C. 17:27 5.2, or a binding determination of the applicable county employment goals determined by the Division, pursuant to N.J.A.C. 17:27 5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices. The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decision of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the applicable employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status, sex, affectional or sexual orientation, and conform with the applicable employment goals, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three (3) documents:

- (a) Letter of Federal Affirmative Action Plan Approval
- (b) Certification of Employee Information Report
- (c) Employee Information Report Form AA302

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Contract Compliance and EEO as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Contract Compliance and EEO for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

Jewish Vocational Service

Company Name (Please Print)

We are aware of our obligation to the State of New Jersey pursuant to N.J.S.A. 10:5-31.

Highest Official (Signature)

*Avi Dogim*  
Dir. of Rehab. Services