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|  | **After-the-Fact (ATF)** **Contract Justification** | DATE OF REQUEST2/14/2022 |
| REQUESTOR      |
| CONTRACT PERIOD      | CONTRACTOR NAME      | PROGRAM / CONTRACT MANAGER      |
| CONTRACT NUMBER (IF APPLICABLE)      | CASE NUMBER (IF CHILD SPECIFIC)      | REGION |
| **Instructions:**DCYF requires procedures to prevent After-the-Fact contracts and amendments. Program/contract managers are required to submit the After-the Fact Contract Justification form. Step 1: Complete the top portion of this formStep 2: Provide the information in 1 through 7 Step 3: Obtain appropriate signatures in 8Step 4: Submit completed and signed form to Regional/Headquarters Contract Manager with your P-CAR**ALL fields are to be completed** |
| 1. Contract type and service description       |
| 2. Contract / amendment summary (*provide a brief summary of the contract purpose*)       |
| 3. Reason for after-the-fact contract / amendment request (*check* ***all*** *that apply)* [ ]  a. Contract process [ ]  b. DCYF process [ ]  c. Budget Process  [ ]  d. Contractor Negotiations [ ]  e. Program or Contract Manager Negotiations [ ]  f. Other (*please explain*)  |
| 4. Detailed explanation for the reason(s) for the request in item 3 above.  |
| 5. Are the services currently being provided? [ ]  Yes [ ]  No  | 6. Have any payments been made to the contractor for these services? [ ]  Yes [ ]  No  |
| 7. Describe your prevention plan on how you will avoid future requests for after-the-fact justification for contracts or contract amendments.  |

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| **8. Signatures** |
| DCYF regional administrator or designee for regional contracts or for DCYF headquarters the requestors supervisor*.*Signature: Print Name:       Date:       **Submit this form with the P-CAR for further processing.**   |