**Agreement Checklist**

**Cover Page:**

Mentor:

Protégé:

Contract No.:

MPA Received Date:

**Page 1:**

Mentor: Protégé: Sponsoring NASA Center:

Mentor UEI Number: [Agreement–A3] Protégé UEI Number: [Agreement–A8]

Type of Agreement: Credit: \_\_\_\_\_\_\_\_\_ Award Fee Program: \_\_\_\_\_\_\_\_\_\_ [Overview]

Length of Agreement (3-Year Maximum): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Agreement-A1]

Contract Number with Subcontract Plan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost of Agreement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Agreement A2]

FY: \_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Agreement A2]

FY: \_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Agreement A2]

FY: \_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Agreement A2]

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| **Package Complete** | **Yes** | **No** | | | **Comments** | **Reference** |
| Signed Mentor-Protégé Agreement (MPA) |  |  | | |  | [Agreement–A20] |
| SBS Endorsement Letter |  |  |  |  |  | [Attachment] |
| COR Endorsement Letter |  |  | | |  | [Attachment] |
| CO Endorsement Letter |  |  | | |  | [Attachment] |

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| **Mentor Eligibility** | **Yes** | **No** | **Comments** | **Reference** |
| New Mentor? |  |  |  | [Agreement–A3] |
| Previously Approved Mentor? |  |  |  | [Agreement–A3] |
| Does Mentor have at least one (1) Subcontracting Plan negotiated with NASA? |  |  |  | [Agreement–A4] |
| Mentor currently suspended or debarred from contracting with Federal Government? |  |  |  | [SAM] |

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| **Protégé Eligibility** | **Yes** | | **No** | | | | **Comments** | | **Reference** | |
| Protégé currently suspended or debarred from contracting with Federal Government? |  | |  | | | |  | | [SAM] | |
| Small Disadvantaged Business |  | |  | | | |  | | [Protégé App.–P2] | |
| 8(a) Expiration Date |  | |  | | | |  | | [Protégé App.–P2] | |
| Veteran-Owned Small Business (VOSB) |  |  |  |  | |  | | [Protégé App.–P2] | |
| Service-Disabled Veteran–Owned Small Business (SDVOSB) |  | |  | | | |  | | [Protégé App.–P2] | |
| Woman-Owned Small Business (WOSB) |  | |  | | | |  | | [Protégé App.–P2] | |
| HUBZone Certified Small Business |  | |  | | | |  | | [Protégé App.–P2] | |
| Historically Black College and University (HBCU) |  | |  | | | |  | | [Protégé App.–P2] | |
| Minority Serving Institution (MSI) |  | |  | | | |  | | [Protégé App.–P2] | |
| NASA SBIR/STTR Phase II Company |  |  |  |  | |  | | [Protégé App.–P2] | |
| AbilityOne Program Company |  | |  |  |  |  | | [Protégé App.–P2] | |

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| **Protégé Information** | **Yes** | **No** | | **Comments** | **Reference** |
| Industry (i.e., R&D, Aerospace Manufacturing, Highly Technical Software and Cutting Edge  Technologies) |  |  | |  | [Protégé App.–P1] |
| Primary NAICS |  |  | |  | [Protégé App.–P3] |
| Additional NAICS |  |  |  |  | [Protégé App.–P3] |
| Additional NAICS |  |  | |  | [Protégé App.–P3] |
| Additional NAICS |  |  | |  | [Protégé App.–P3] |
| Percentage Owned by Mentor (Not more than 10%) |  |  | |  | [Agreement–A8] |
|  | | | | | |
| Total HBCU/MI, PTAC, or SBDC Cost  $\_\_\_\_and % (Cannot exceed 20%) |  |  | |  | [Agreement–A2] |
| ODC Cost ($$) & (%) (Not to exceed 10% of Direct Labor Cost) |  |  | |  | [Agreement–A2] |
| MPA Has Value to NASA |  |  | |  | [Agreement–A15] |
| Termination Procedures for Both Parties (Addressed on Organization/Co. Letterhead) |  |  | |  | [Agreement–A16] |
| Mentor Will Comply with Reporting/ Review Requirements (Addressed on Organization/Co. Letterhead) |  |  | |  | [Agreement–A17] |
| Protégé Will Comply with Reporting/ Review Requirements (Addressed on Organization/Co. Letterhead) |  |  | |  | [Agreement–A17] |

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| **Technical and Cost Proposal** | **Yes** | | | **No** | | **Comments** | **Reference** |
| Align with the MPA |  | | |  | |  | [Agreement–A15] |
| Contains Work Break Structure |  | | |  | |  | [Agreement–A13] |
| Has a Milestones Chart? |  | | |  | |  | [Agreement–A13] |
| Has a Technical Proposal? Total Hours \_\_\_\_\_\_\_\_\_\_\_\_  Total Dollars\_\_\_\_\_\_\_\_\_\_\_\_ |  | | |  | |  | [Agreement–A11] |
|  |  |  |  |  |  | [Agreement–A13] |
|  | | |  | |  | [Agreement–A13] |
| Has a Cost Proposal? |  | | |  | |  | [Agreement–A12] |
| Technical Transfer % against Direct Labor Dollars \_\_\_\_\_\_\_%  Technical Transfer % against Direct  Labor Hours % |  | | |  | |  | [Attachment to A13 of the Agreement] |
| Business Development % against Direct Labor Dollars %  Business Development % against Direct  Labor Hours % |  | | |  | |  | [Attachment to A13 of the Agreement] |

Note: Business and Technical Development percents should be the same for both Direct Labor Hours percent and Direct Labor Dollars percent.

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| **Agreement Approval** | **Yes** | **No** | **Comments** | **Reference** |
| Firm Name/Address/Phone #/POC Mentor and Protégé |  |  |  | [Agreement–A3/A19] |
| Description of Developmental Assistance |  |  |  | [Agreement–A10] |
| Milestones for Developmental Assistance Plan |  |  |  | [Agreement–A13] |
| Metrics for Developmental Assistance Plan |  |  |  | [Agreement–A13] |
| Past and Estimated Subcontracts to Protégé(s) |  |  |  | [Agreement–A9] |
| **Estimate of Cost $\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  | [Agreement–A2] |

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**Additional Elements:** Additional Elements section should be completed for Protégés that have previously participated in the NASA MPP.

|  |  |
| --- | --- |
| **Additional Elements** | |
| Previous Mentor |  |
| Length of Previous Agreement |  |
| Dates of Agreement |  |
| Contract Number |  |
| Technical Assistance Provided |  |
| Business Assistance Provided |  |

SBS Approval SBS Disapproval

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Reviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PM Concurrence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_