

**EXHIBIT E**  
**PARTNERING FOR GROWTH PROGRAM FOR**  
**DISADVANTAGED BUSINESS ENTERPRISES (DBE)/OR**  
**VETERAN AND SERVICE-DISABLED VETERAN OWNED SMALL BUSINESSES (VOSB)**

PSB: \_\_\_\_\_ ITEM: \_\_\_\_\_

**Select One**

DBE: \_\_\_\_\_ VOSB: \_\_\_\_\_

MEMORANDUM OF UNDERSTANDING  
BETWEEN:

THE MENTOR:	FIRM NAME ADDRESS	A N D	THE PROTÉGÉ:	FIRM NAME ADDRESS

**Note: The Partnering for Growth Program was formerly known as the Partnership-Mentor/Protégé Program.**

**Note: The DBE goal is separate and distinct from the VOSB goal. A single firm may not be utilized to achieve credit toward both DBE and VOSB goals on a single project. Therefore, the protégé participation must match the goal for which the protégé is being utilized.**

**I. PROGRAM PURPOSE**

The Mentor and the Protégé commit to entering into a Partnering for Growth Agreement in accordance with the current guidelines of the Tollway's Partnering for Growth (formerly known as Partnership Mentor/Protégé) Program. The purpose of the Program is to facilitate the Tollway's professional service consultants with:

- A. Meeting Disadvantaged Business Enterprise/Minority Business Enterprise/Women Business Enterprise (DBE) and/or Veteran and Service-Disabled Veteran Owned Small participation goals,
- B. Establishing new partnerships with DBE/VOSB firms that have no prior experience providing professional services to the Tollway,
- C. Continuing technical and nontechnical support for DBE/VOSB firms that have limited experience providing professional services to the Tollway, and
- D. Assisting DBE/VOSB firms with building their capacity and becoming and/or remaining self-sufficient, competitive, and profitable business enterprises.

A **DBE** means a business certified by the Illinois Unified Certification Program as a DBE or certified by the City of Chicago or Cook County as an M/WBE or certified by the U.S. Small Business Administration (SBA) as an 8(a) business.

A **VOSB** means a business certified by the State of Illinois Department of Central Management Services (CMS) as a Veteran-owned small business or Service-disabled Veteran-owned small business.

Professional Services shall be defined as Architecture, Landscape Architecture, Professional Engineering and Professional Land Surveying.

**I. CONFORMANCE TO PROGRAM GOALS**

A. Participation in this project by the Protégé.

- 1. In area(s) being mentored:
  - Technical work covered by Mentor’s prequalification category(ies) %  
Scope:
  
  - Work not applicable to prequalification category(ies) %  
Scope:

*Note: Protégé must participate in either one or both areas*

- 2. In area(s) not being mentored:
  - Work the Protégé will self-perform %

*Note: Protégé participation in this area is optional*

- 3. **Total participation by the Protégé (Sum of 1. and 2.)** %

B. Briefly describe an assessment of the Protégé’s needs *(one-half page maximum)*.

C. Briefly describe specific assistance the Mentor will provide to support the Protégé’s needs *(one-half page maximum)*.

**I. MENTOR EXPERIENCE WITH THE PROGRAM**

A. Has the Prime consultant served as a Mentor on a Tollway project completed within the last five years? If yes, list Contract #(s):

YES  NO

Indicate Phase(s) of Work:  MP  DSE  CM  Other  
Areas of Assistance:

B. Is the Prime consultant currently serving as a Mentor on a Tollway project? If yes, list Contract #(s):

YES  NO

Indicate Phase(s) of Work:  MP  DSE  CM  Other  
Areas of Assistance:

C. Has the Prime consultant mentored the Protégé on another Tollway project within the last five years? If yes, list Contract #(s):

YES  NO

Indicate Phase(s) of Work:  MP  DSE  CM  Other  
Areas of Assistance:

**II. PROTÉGÉ EXPERIENCE WITH THE PROGRAM**

A. Has the DBE/VOSB firm ever been contracted by the Tollway as a Prime consultant? If yes, list date, Contract #, and description of scope for each project(s):

YES  NO

Date                      Contract #                      Description of Scope

B. Has the DBE/VOSB firm participated in a Mentor/Protégé relationship on a Tollway project completed within the last five years? If yes, list the following for each project(s).

YES NO

<u>Contract #</u>	<u>Protégé Award \$</u>	<u>Mentored by</u>	<u>Area of Assistance</u>
-------------------	-------------------------	--------------------	---------------------------

C. Is the DBE/VOSB firm currently participating in a Mentor/Protégé relationship on a Tollway project? If yes, list the following for each project(s).

YES NO

<u>Contract #</u>	<u>Protégé Award \$</u>	<u>Mentored by</u>	<u>Area of Assistance</u>
-------------------	-------------------------	--------------------	---------------------------

D. Has the DBE/VOSB firm participated in a Mentor/Protégé relationship on an Illinois Department of Transportation project completed within the last five years? If yes, list the following for each project(s).

YES NO

<u>PSB No/Item</u>	<u>Protégé Award \$</u>	<u>Mentored by</u>	<u>Area of Assistance</u>
--------------------	-------------------------	--------------------	---------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- E. If the Protégé has been mentored in the same Area of Assistance proposed on this project for a Tollway and/or IDOT project a combined total of more than three times, provide explanation supporting need for additional mentoring.

**III. STATEMENT OF COMMITMENT**

**The purpose of this statement is to confirm a commitment between the Mentor and Protégé, that upon notice of selection from the Illinois Tollway for this PSB Item, a formal Partnering for Growth Agreement for DBEs/VOSBs will be prepared in accordance with the current guidelines of the Tollway’s Partnering for Growth Program.**

Should the proposer, after contract negotiation, wish to modify the ‘Plan to Achieve Diversity Goal’, the awarded consultant is requested to submit a detailed explanation of the work category changes that were not known at the time of the SOI submittal.

SIGNATURE (Mentor Representative)

SIGNATURE (Protégé Representative)

(Date)

(Date)

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_