



Date:

(MM/DD/YYYY)

Mentor Information:

Mentor:

First Name

Last Name

Street Address 1:

Street Address 2:

City:

State:

ZIP:

Website

Protégé Information:

Protégé:

First Name

Last Name

Street Address 1:

Street Address 2:

City:

State:

ZIP:

Website:

Dear Mentor/ Protégé Representative:

The U.S. Department of Homeland Security's (DHS) Mentor-Protégé Program (MPP) Congressional Requirements Report is designed to follow up and assess the terms of your agreement. Under [Subtitle H of Title VIII of the Homeland Security Act of 2002 \(6 U.S.C. 451 et seq.\)](#), mentor-protégé teams shall submit data points and/or metrics. In accordance with the Mentor-Protégé Policy document (See Page 5, Section 1.16 – Reports), it is our intent to identify key business accomplishments and “Lessons Learned” that have benefited both companies within a 36-month period as well as take the opportunity to offer suggestions on any issues, if any. Review, complete, and return a completed document to: dhsmpp@hq.dhs.gov within 30 business days of receipt.

OFFICE OF SMALL AND DISADVANTAGED BUSINESS UTILIZATION (OSDBU) MID-TERM (18-Months) LESSONS LEARNED REPORT

Industry Sensitive: This document contains proprietary information (See FAR 3.104). The information contained herein is not to be divulged except as permitted by law or as authorized by the OSDBU Director.

DHS-OSDBU Point of Contact Information:

Mentor-Protégé Program Manager:

MENTOR-PROTÉGÉ INFORMATION

Mentor-Protégé Agreement Date:

Date:

(MM/DD/YYYY)

Mentor Information:

Mentor:

First Name

Last Name

Point of Contact Name:

Phone (###-###-####):

Email:

Street Address 1:

Street Address 2:

City:

State:

ZIP:

Protégé Information:

Protégé:

First Name

Last Name

Point of Contact Name:

Phone (###-###-####):

Email:

Street Address 1:

Street Address 2:

City:

State:

ZIP:

Accomplishments

a. Mentor Firm

How many subcontracting opportunities were provided to the protégé?

0 1–3 4–7 8 or more

How many DHS opportunities did your firm bid on during the first year?

0 1–5 6–10 11 or more

How many DHS opportunities was your firm awarded during the 12-month period?

0 1–2 3–5 6 or more

How often do you hold progress meetings with the protégé?

Biweekly Monthly Quarterly

How meaningful has this Mentor-Protégé Agreement been?

(On a scale of 1 to 5, with 1 being not meaningful and 5 being very meaningful)

1 2 3 4 5

b. Protégé

How many subcontracts and/or prime contract opportunities has your firm or institution experienced with your mentor?

0 1–2 3–5 6 or more

What types of benefits has your firm received from the agreement?

Please check the box(es) and elaborate:

Technical Managerial Financial Marketing

Other

HBCU/MI competitiveness priority areas relating to:

Education 21st Century Infrastructure Academic Research Enterprise

Other *(Please explain the type of assistance below).*

Projected Goals: What are your goals for the next 18 months for the Agreement?

MENTOR PROTÉGÉ ALLOCATED DOLLAR REPORTING in eSRS

Please specify the DHS contract number and allocated dollars attributed to the mentor-protégé agreement for all small business subcontracting categories, under Remarks, within the Individual Subcontracting Report or Semi Subcontracting Report.

Signed Agreement:

Mentors and Protégés should sign and date the Mid-Progress Report.

Mentor

Protégé

Printed Name of Mentor

Printed Name of Protégé

Signature of Mentor

Signature of Protégé

Date (MM/DD/YYYY) Title

Date (MM/DD/YYYY) Title