

ATTACHMENT 17.22: SOLUTION OPERATIONS LEAD - REFERENCE FORM

Bidder Instructions: Complete items 1-5 of this [ATTACHMENT 17.22: SOLUTION OPERATIONS LEAD - REFERENCE FORM](#). One (1) form must be used for each corresponding [ATTACHMENT 17.21: SOLUTION OPERATIONS LEAD - QUALIFICATIONS FORM](#) submitted. The Bidder's key staff reference contact must complete the remainder of this form. The reference information below must be consistent with the corresponding [ATTACHMENT 17.21: SOLUTION OPERATIONS LEAD - QUALIFICATIONS FORM](#). Bidder must submit a copy of the completed [ATTACHMENT 17.21: SOLUTION OPERATIONS LEAD - QUALIFICATIONS FORM](#) and the corresponding [ATTACHMENT 17.22: SOLUTION OPERATIONS LEAD - REFERENCE FORM](#), to the staff's reference(s) for completion.

Instructions to the staff's Reference: Using the rating scale below box 5, rate your satisfaction with the staff that performed the services described in [ATTACHMENT 17.21: SOLUTION OPERATIONS LEAD - QUALIFICATIONS FORM](#). Complete and date this [ATTACHMENT 17.22: SOLUTION OPERATIONS LEAD - REFERENCE FORM](#) and return the form(s) to the Bidder.

Reference Form		
1	Bidder:	
2	Key Staff Name:	
3	Key Staff's Referenced Project Name:	
4	Company Name (of key staff's reference):	
5	Contact Name, Title, Email Address, and Telephone Number of staff's reference:	
<u>Satisfaction Rating to be completed by the Staff's Reference:</u> Using the following scale: 0 = Unsatisfactory, 1 = Marginal, 2 = Satisfactory, 3 = Excellent Circle only one number for each question below.		
6	How would you rate the individual's overall performance?	0 1 2 3

Reference Form		
7	How would you rate the individual's effectiveness at communicating (orally and in writing) with project members and stakeholders?	0 1 2 3
8	How would you rate the individual's effectiveness in dealing with conflicting priorities?	0 1 2 3
9	How would you rate the individual's ability to train and lead client operations teams in knowledge transfer and management of business rules?	0 1 2 3
10	How would you rate the individual's ability to manage and maintain operations and technical support?	0 1 2 3

By completing this reference form, I declare the following:

1. I have reviewed the information contained in items 1-10 above, and the corresponding Key Staff Qualifications Form and the information is true and correct;
2. I am/was employed by the company for whom the project was completed; and
3. I performed a management or supervisory role on the cited project.

DECLARATION OF REVIEW AND CORRECT INFORMATION	
Reference Signature:	Date:
Printed Name:	
Reference Title or role on the project:	
Reference Email:	
Reference Phone:	