

ATTACHMENT 15.5: IMPLEMENTATION SERVICES LEAD - REFERENCE FORM

Purpose: Based on the satisfaction ratings received from the proposed Key Staff's references, the State will use the ratings to score the Key Staff.

Instructions to Bidder: Complete Part A, items 1-8 of this Key Staff Reference Form, attach the corresponding Key Staff Qualifications Form and send to references to complete Part B, items 10-19. Once the Key Staff Reference Form is completed, the Bidder must submit it with its proposal.

The Bidder must complete and submit a Key Staff Reference Form for each of the projects cited on the corresponding Key Staff Qualification Form.

Instructions to the Key Staff's Reference: Complete Part B, items 10-19 of this form using the rating scale in "Reference Satisfaction Rating" field (item 9). Rate your satisfaction with the Key Staff who performed the services described in item 8, Project Description & Key Staff's role on the project, and confirm that the information in Part A is consistent and corresponds with the corresponding Key Staff Qualification Form attached. Complete the bottom of this Attachment and return the form to the Bidder.

PART A: TO BE COMPLETED BY BIDDER		
1	Bidder:	
2	Key Staff Name:	
3	Project Name:	
4	Name of Company for whom the Project was completed:	
5	Contact Name and Information of the Key Staff's Reference:	
6	Key Staff's Start and End Dates on the Project:	
7	Contract Amount: \$	\$
8	Project Description & Key Staff's role on the project:	

PART B: TO BE COMPLETED BY KEY STAFF'S REFERENCE					
9	<u>Reference Satisfaction Rating:</u> Using the following scale to rate the Key Staff's overall performance on the services provided: 0 = Unsatisfactory, 3 = Marginal, 5 = Satisfactory, 8 = Exceeds Expectations Circle only one number for each question (10-193) below.	Reference Ratings (Total possible rating score = 80)			
10	How would you rate the individual's overall performance?	0	3	5	8
11	How would you rate the individual's effectiveness at communicating (orally and in writing) with project members and stakeholders?	0	3	5	8
12	How would you rate the individual's effectiveness in dealing with conflicting priorities?	0	3	5	8
13	How would you rate the individual's effectiveness in the role they were in for the cited project?	0	3	5	8
14	How would you rate the individual's ability to handle pressure?	0	3	5	8
15	How would you rate the individual's ability to collaborate with others?	0	3	5	8
16	How would you rate the individual's ability to meet deadlines?	0	3	5	8
17	How would you rate the individual's ability to handle challenges or difficult situations?	0	3	5	8
18	How would you rate the individual's time management skills?	0	3	5	8
19	How would you rate the individual's organizational skills?	0	3	5	8

By completing this reference form, I declare the following:

1. I have reviewed the information contained in Part A, items 1-8 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.

TO BE COMPLETED BY PROPOSED KEY STAFF'S REFERENCE	
Signature:	
Printed Name:	
Date:	
Title or role on the project:	
Email:	
Phone:	