

**Appendix B - Minimum Qualification Form
#98077 IT Advisory Services**

GENERAL

THE MINIMUM QUALIFICATIONS SHALL BE SUBMITTED ON THIS FORM. IN ORDER TO BE CONSIDERED A QUALIFIED BIDDER BY JEA YOU MUST MEET THE MINIMUM QUALIFICATIONS LISTED BELOW, AND BE ABLE TO PROVIDE ALL THE SERVICES LISTED IN THIS SOLICITATION.

THE BIDDER MUST COMPLETE THE BIDDER INFORMATION SECTION BELOW AND PROVIDE ANY OTHER INFORMATION OR REFERENCE REQUESTED. THE BIDDER MUST ALSO PROVIDE ANY ATTACHMENTS REQUESTED WITH THIS MINIMUM QUALIFICATIONS FORM.

PLEASE SUBMIT THE ORIGINAL AND THREE COPIES OF THIS FORM AND ANY REQUESTED ADDITIONAL DOCUMENTATION WITH THE BID SUBMISSION.

BIDDER INFORMATION

COMPANY NAME: _____

BUSINESS ADDRESS: _____

CITY, STATE, ZIP CODE: _____

TELEPHONE: _____

FAX: _____

E-MAIL: _____

PRINT NAME OF AUTHORIZED REPRESENTATIVE: _____

SIGNATURE OF AUTHORIZED REPRESENTATIVE: _____

NAME AND TITLE OF AUTHORIZED REPRESENTATIVE: _____

MINIMUM QUALIFICATIONS:

- Respondent shall provide client references to demonstrate the successful completion of two (2) similar IT advisory services contracts within the last five (5) years of the Solicitation due date.
 - One (1) of the similar IT advisory services contracts shall demonstrate successful completion of a business case similar to the scope and complexity as contained in this Solicitation in an IT environment with no less than 1,500 end users.

AND

- One (1) of the similar IT advisory services shall be related to workplace service contracts and demonstrate successful completion of an ITN process similar to the scope and complexity as contained in this Solicitation.

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SIMILAR IT ADVISORY SERVICES CONTRACT 1

Reference Name _____

Reference Phone Number _____

Reference E-Mail Address _____

Contract Year/Amount _____

Is this Contract in an IT environment with no less than 1,500 end users?

Yes No

Project Title _____

Address of Work _____

Description of Project _____

SIMILAR IT ADVISORY SERVICES CONTRACT 2

Reference Name _____

Reference Phone Number _____

Reference E-Mail Address _____

Contract Year/Amount _____

Does this Contract demonstrate successful completion of an ITN process similar to the scope and complexity as contained in this Solicitation?

Yes No

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Project Title _____

Address of Work _____

Description of Project _____
