**TOWN OF KERNERSVILLE, NORTH CAROLINA**

**REQUEST FOR QUALIFICATIONS (RFQ):**

Photography and Videography Services

**DATE OF ISSUE:**

Monday, November 21, 2023

**STATEMENT OF QUALIFICATIONS DUE:**

**Tuesday, December 5, 2023 by 2:00 PM EST**

Town of Kernersville

P.O. Box 728

Kernersville, NC 27285

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Photography and Videography Services

The Town of Kernersville, North Carolina (hereinafter called the “Town”) is seeking photography and videography services for the purpose of special events, programming, and marketing activities. The Town is soliciting your qualifications to provide the necessary photography and videography services, subject to the terms and conditions set forth in this Request for Qualifications. The Town reserves the right to hire multiple photographers, or reject all Statement of Qualifications.

QUESTIONS AND INQUIRIES

Questions or inquiries relative to this RFQ must be e-mailed to Cady Ray at [**Cray@toknc.com**](mailto:Cray@toknc.com) by:

**5:00 PM EST, Thursday, November 30, 2023**

The Town will provide written responses to all inquiries received by this date, and responses will be made available to all recipients of this RFQ. Any oral responses made by any representative of the Town may not be relied upon. Any supplements or amendments to this RFQ will be posted on the [**Town of Kernersville website**](http://www.toknc.com) and furnished to potential bidders by **5:00 PM EST, Friday, December 1, 2023**.

RFQ RESPONSE SUBMISSION

Statement of Qualifications must be submitted electronically. An electronic Statement of Qualifications should be submitted by attaching a single PDF file of all requested items, including the required forms to an email entitled:

***“RFQ – Photography and Videography Services”*** and emailed to Rebekah East, Purchasing & Budget Manager at [**Reast@toknc.com**](mailto:Reast@toknc.com).

Bidders are welcome to copy Cady Ray, Recreation Superintendent at [**Cray@toknc.com**](mailto:Cray@toknc.com) on the submittal email as she will be serving as the Contract Point of Contact.

Statement of Qualifications should be received no later than: **2:00 PM EST, December 5, 2023**

***Late Statement of Qualifications will not be considered.***

The Town will not be obligated for the expenses of any provider arising out of preparation and/or submittal of responses to this RFQ. Any and all Statement of Qualifications to this RFQ are to be prepared at the cost and expense of the respondents, with the express understanding that there may be no claims whatsoever for the reimbursement of any costs, damages, or expenses relating to this procurement from the Town or any other party for any reason (including the cancellation of this RFQ).

Statement of Qualifications must be made in the official name of the individual, firm, or corporation under which the business is conducted (showing official business address) and must be signed in ink by a person duly authorized to legally bind the business entity submitting the Statement of Qualifications.

EVALUATION CRITERIA

Below is a description of the evaluation criteria that will be used to evaluate the Statement of Qualifications. To be deemed responsive, it is important for the firm’s Statement of Qualifications to contain appropriate detail to demonstrate satisfaction of each criterion and compliance with the performance provisions outlined in this RFQ. The Statement of Qualification will be the primary source of information used in the evaluation process. Statement of Qualification must contain information specifically related to the proposed services requested in this RFQ. Failure of any firm to submit information requested may result in the elimination of the Statement of Qualification from further evaluation.

1. Following the deadline for submittal of Statement of Qualifications, the Town of Kernersville will analyze and rank all Vendors based on their response to the information requested.
2. The Town reserves the right to finalize a Contract based on all factors involved in the written qualification submittal without further discussion or interviews.
3. The Town will conduct an evaluation of the Statement of Qualification(s) submitted. The evaluation will be based on at least the following criteria; however, not necessarily in the order provided or with equal weight given to each criterion.
   1. Compliance with the RFQ requirements.
   2. Ability to meet requirements;
   3. Relevant experience & qualifications; and
   4. Other criteria as set forth below:
      * The ability of the Vendor to provide the highest quality service while staying within the Town’s budget.
      * The capacity of the Vendor to perform the contract or provide the service promptly or within the time specified, without delay or interference.
      * The Vendor’s ability to deliver results, gauge results, and report.
      * The character, integrity, reputation, experience, and efficiency of the Vendor – including but not limited to – their past performance record with the Town or with those given as references.

EVALUATION PROCESS

Statement of Qualifications will be evaluated for quality, completeness, and price value to the Town of Kernersville. Selection shall be made from all offers deemed to be fully qualified and best suited among those submitting Statement of Qualifications based on the evaluation of factors included in the RFQ. Price per event as well as al la carte services will be negotiated following the evaluation and ranking of the most qualified vendor.

OVERVIEW & MINIMUM QUALIFICATIONS

The Town of Kernersville is requesting Statement of Qualifications for a twelve-month independent contractor for the provision of photography, videography, and editing services. This vendor is a critical component of the Town of Kernersville Parks and Recreation Department, and will be eligible to work with other Town departments as well.

While this vendor will be involved with content creation and direction decisions as part of the team, the majority of the time will be spent on setting up for, shooting, and editing both photos and videos, to include coverage of program activities, special events, campaigns, etc. Content will be used for a variety of purposes, including on agency social media channels and websites as well as directly provided to the media.

**Key Details:**

* This contract will be for one (1) year beginning January 1, 2024, with three (3) mutually agreed-upon one-year extensions at a mutually acceptable cost not to exceed an increase of 5%.
* Open communication and on-going dialogue is expected.
* Explicit schedules and plans shall be created in coordination with Town staff and corresponding agency events and schedules.
* Responsible for scheduling him/herself to produce the needed content within the necessary timeframe and achieve team goals.
* All content created must be organized so it is accessible and searchable to other Town staff involved in the event or project.
* The quote for services shall encompass provision of the following items:
  + Fresh visual content generated to include still photographs and videos.
  + Setting up for, shooting, and editing event and program video shorts.
  + The creation of short films for training, community projects, social media, and other purposes as needed.
  + The creation of special event videos and photo galleries, i.e. Town holiday events, ground-breaking ceremonies, retirements, programming, and so on.
  + Design creation as needed, including brochures, invitations, marketing materials, car designs, shirts, logos and other design needs.
  + Visual content shall be made to be compatible with both mobile and desktop devices.
  + Studio quality professional headshots of staff members shall be taken as requested.
  + Town of Kernersville shall maintain the copyrights to the original creative content for future use.
  + Storage of all original content that is created for use on the Town of Kernersville’s internal network.
  + Assist the other Town staff in marketing and the distribution of content via social media.
* Must be proficient utilizing editing software.
* Must be proficient working with AV equipment, microphones, syncing video content, and rendering professional audio.
* Must have photo, video, and editing experience.
* Must have knowledge of lighting multiple subjects in various scenarios.
* Must be physically able to set up light stands, lights, modifiers, tripods, and any other equipment setup needed for each project.
* Must include links to portfolios or video work with Statement of Qualifications.
* Availability to attend and document agency events, including on weekends and holidays, sometimes with short notice.
* Must carry Commercial General Liability and Professional Liability Insurance as required by the Town’s Risk Manager.

**Contract Period: The initial Contract will begin on or about January 1, 2024 and continue until December 31, 2024, with the Town of Kernersville having the option of three (3) mutually agreed-upon one-year extensions at a mutually acceptable cost not to exceed an increase of 5%.** Any extension shall be based upon satisfactory performance by the Contractor. Dates provided are estimates only. Any resulting contract will begin on the date specified in the notice of award.

If further information is needed or if you have any questions regarding this Request for Statement of Qualifications, please direct your questions to:

Cady Ray, Recreation Superintendent

Email: [Cray@toknc.com](mailto:Cray@toknc.com)

Phone: (336) 992-0806

Thank you in advance for your consideration of this Request for Qualifications.

Sincerely,

Rebekah East

Rebekah East

Purchasing & Budget Manager

[REast@toknc.com](mailto:fader@toknc.com)

(336) 992-5254

Terms and Conditions of RFQ

It is the practice of the Town of Kernersville that an employee, officer, or agent of the Town may not participate in any manner in the bidding, awarding, or administering of contracts or agreements in which they, or a member of their immediate family, their business partner, or any organization in which they serve as an officer, director, trustee, or employee, have a financial interest. All Statement of Qualifications must be firm and not subject to increase, unless specified within the provisions of this Request for Qualifications (RFQ) and mutually agreed upon by the Town and the Proposer. No special inducements will be considered that are not a part of the original Statement of Qualification document.

TOWN RIGHTS AND OPTIONS

The Town, at its sole discretion, reserves the following rights:

* To supplement, amend, substitute or otherwise modify this RFQ at any time.
* To cancel this RFQ with or without the substitution of another RFQ.
* To take any action affecting this RFQ, this RFQ process, or the Services subject to this RFQ that would be in the best interests of the Town.
* To issue additional requests for information or clarification from Offerors or to allow corrections of errors or omissions.
* To require one or more Service Providers to supplement, clarify or provide additional information in order for the Town to evaluate the Responses submitted.
* To negotiate an agreement with a Service Provider based on the information provided in response to this RFQ.

PUBLIC RECORDS

Any material submitted in response to this RFQ will become a “public record” once a contract has been awarded and shall be subject to public disclosure consistent with NCGS § 132. Proposers must claim any applicable exemptions to disclosure provided by law in their response to this RFQ. Proposers must identify materials to be protected and must state the reasons why such exclusion from public disclosure is necessary and legal. The Town reserves the right to make all final determination(s).

E-VERIFY COMPLIANCE

Per NCGS § 143-133.3, provider shall comply with the requirements of Article 2 of Chapter 64 of the North Carolina General Statutes. Further, if the Provider utilizes a subcontractor, the Provider shall require the subcontractor to comply with the requirements of Article 2 of Chapter 64 of the North Carolina General Statutes.

DIVESTMENT AND NO-NOT CONTRACT RULES

Provider hereby certifies that it is not on the North Carolina State Treasurer’s list of persons engaging in business activities, pursuant to NCGS § 147-86.58, nor will Provider utilize on this agreement any subcontractor on such list. This list, along with additional information, is available on the Treasurer’s Office site: [Click to View Website](https://www.nctreasurer.com/about/transparency/commitment-transparency/divestment-and-do-not-contract-rules)

EXAMPLES OF EVENTS/Programs

EVENTS

Each year the Town hosts the following events that require photography and/or videography coverage:

* Father Daughter Dance (February)
* Mother Son Night (May)
* Movie in the Park (June)
* Honeybee Festival (August)
* Haunted Movie Night (October)
* Christmas Tree Lighting (December)

Each event will require 2-5 hours of photography and/or videography services, whereas small events require 2 hours of coverage and larger events require 5 hours of coverage.

The awarded vendor must provide the following for each event:

* High Definition 1080p Delivery, Music license, animated text graphics.
* Ability for Town of Kernersville to use materials in marketing materials, including ability to crop and apply graphic design features.
* Final images delivered 2 weeks following event, high resolution JPEG.
* Final recap video of event no later than 2 weeks following event.

PROGRAMS

Occasionally, the Town may have additional photography and/or videography coverage needs for community programming (camps & athletics).

Each program will require 1-2 hours of photography and/or videography services depending on how many programs are occurring during that particular timeframe.

The awarded vendor must provide the following for each event:

* High Definition 1080p Delivery, Music license, animated text graphics.
* Ability for Town of Kernersville to use materials in marketing materials, including ability to crop and apply graphic design features.
* Final recap video of programs no later than 2 weeks following the last day of coverage (if multiple programs were filmed across multiple evenings).
* Final images delivered 2 weeks following the last day of coverage (if multiple programs were filmed across multiple evenings).

Statement of No Bid

**If you do not intend to bid on this Statement of Qualifications, please return this form immediately to:**

|  |  |  |
| --- | --- | --- |
| Physical Address:  Town of Kernersville –  Rebekah East  Finance Department  134 East Mountain Street  Kernersville, NC 27284 | Postal Address:  Town of Kernersville –  Rebekah East  Finance Department  Post Office Box 728  Kernersville, NC 27285 | Email:  [reast@toknc.com](mailto:reast@toknc.com) |

We, undersigned, have declined to bid on ***RFQ – Photography and Videography Services.***

Reason (please check all that apply):

* Specifications “too tight” (explain below).
* Insufficient time to respond.
* Specification unclear (explain below).
* We do not offer this RFQ or an equivalent.
* Our schedule does not permit us to perform.
* Unable to meet Specifications.
* Other

Remarks:

We understand that if this “Statement of No Bid” is not executed and returned, our name may be deleted from the list of qualified bidders.

COMPANY NAME: ­

ADDRESS: ­

­

SIGNATURE: DATE:

(Authorized Representative)

**“STATEMENT OF QUALIFICATIONS SIGNATURE FORM” must be completed and submitted:**

Statement of Qualifications Signature Form

**By signing below the Proposer agrees to the following:**

The Proposer certifies that the Statement of Qualification is made in good faith and without collusion with any person submitting a Statement of Qualification in response to this RFQ or with any officer or employee of the Town of Kernersville

The undersigned further agrees, in connection with the performance of this agreement, not to discriminate against any employee or applicant for employment because of race, religion, color, gender, age, handicap, political affiliation or national origin

The Town reserves the right to hold Statement of Qualifications open for a period of forty-five days (45) calendar days after the due date before making awards.

Statement of Qualifications are to be signed by an officer of the company authorized to bind the submitter to its provisions. Failure to manually sign the appropriate Statement of Qualification form will disqualify the Proposer and the Statement of Qualification will not be considered.

Submission of a Statement of Qualification shall indicate that the Contractor is fully aware of the requirements for providing the services requested by the Town of Kernersville.

The Town may, at its sole discretion, reject any or all Statement of Qualifications submitted and reserves the right to consider alternatives that may be in the best interest of the Town of Kernersville.

Required items to be included with Statement of Qualification:

**Failure to include the following with your submitted Statement of Qualifications may be considered as non-responsive and could result in rejection of your Statement of Qualifications.**

Statement of Qualifications Signature Form

Non-Collusion Affidavit

Signed Addenda (If Issued)

Statement of Qualifications

Schedule A – Current Projects

Schedule B – Previous Experience with Similar Projects

Schedule C – Key Individuals and References

Link to portfolios and/or video work

**“NON-COLLUSION AFFIDAVIT” must be completed and submitted:**

Non-Collusion Affidavit

State of

County of

Project: **PHOTOGRAPHY AND VIDEOGRAPHY SERVICES (RFQ 24-02)**

(name), being first duly sworn, deposes and says that:

1. He/she is (circle: owner, partner, officer, authorized representative, or agent) of

, the Bidder that has submitted the attached Bid;

1. He/she is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such Bid;
2. Such Bid is genuine and is not a collusive or sham Bid;
3. Neither the said Bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this Affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Bidder, firm or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Bidder, firm or person to fix the price or prices in the attached Bids of any other Bidder, or to fix any overhead, profit or cost element of the Bid price or the Bid price of any other Bidder, or secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the Town of Kernersville, N.C. or any person interested in the proposed Contract; and
4. The price or prices quoted in the attached Bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Bidder or any of its agents, representatives, owners, employees or parties in interest, including this Affiant.

Authorized Signature (SEAL) Printed Name

Subscribed and Sworn to Before me this Day of , 20 .

Notary Public:

My Commission Expires: (SEAL)

**“STATEMENT OF QUALIFICATIONS” must be completed and submitted:**

Statements of Qualifications

1. General Information
   1. Provide contact information for the Business:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Legal Name of Business: | |  | | | |
| Corporate Office | | | | | |
| Name: |  | | | Phone number: |  |
| Title: |  | | | Email address: |  |
| Business address of corporate office: | | |  | | |
|  | | |
|  | | |
| Local Office | | | | | |
| Name: |  | | | Phone number: |  |
| Title: |  | | | Email address: |  |
| Business address of local office: | | |  | | |
|  | | |
|  | | |

* 1. Provide information on the Business’s organizational structure:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Form of Business: | | Sole Proprietorship  Partnership  Corporation | | | | |
| Limited Liability Company  Joint Venture comprised of the following companies: | | | | | | |
| 1. |  | | | | | |
| 2. |  | | | | | |
| 3. |  | | | | | |
| Provide a separate Qualification Statement for each Joint Venturer. | | | | | | |
| Date Business was formed: | | |  | State in which Business was formed: | |  |
| Is this Business authorized to operate in the Project location? | | | | | Yes  No  Pending | |

* 1. Provide information regarding the Business’s officers, partners, and limits of authority.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: |  | Title: |  | |
| Authorized to sign contracts:  Yes  No | | Limit of Authority: | | $ |
| Name: |  | Title: |  | |
| Authorized to sign contracts:  Yes  No | | Limit of Authority: | | $ |
| Name: |  | Title: |  | |
| Authorized to sign contracts:  Yes  No | | Limit of Authority: | | $ |

1. Licensing
2. Provide information regarding licensure for Business:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of License: |  | | |
| Licensing Agency: |  | | |
| License No: |  | Expiration Date: |  |
| Name of License: |  | | |
| Licensing Agency: |  | | |
| License No: |  | Expiration Date: |  |
| Name of License: |  | | |
| Licensing Agency: |  | | |
| License No: |  | Expiration Date: |  |

1. Diverse Business Certifications
2. Provide information regarding Business’s Diverse Business Certification, if any. Provide evidence of current certification.

|  |  |  |  |
| --- | --- | --- | --- |
| Certification | | Certifying Agency | Certification Date |
| Disadvantaged Business Enterprise | |  |  |
| Minority Business Enterprise | |  |  |
| Woman-Owned Business Enterprise | |  |  |
| Small Business Enterprise | |  |  |
| Disabled Business Enterprise | |  |  |
| Veteran-Owned Business Enterprise | |  |  |
| Service-Disabled Veteran-Owned Business | |  |  |
| HUB (Historically Underutilized) Business | |  |  |
| Other |  |  |  |
| None | | | |

1. Insurance
2. Provide information regarding Business’s insurance company(s), including but not limited to its Commercial General Liability carrier. Provide information for each provider.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of insurance provider, and type of policy (CLE, auto, etc.): | | | |  | | |
| Insurance Provider | | | Type of Policy (Coverage Provided) | | | |
|  | | |  | | | |
|  | | |  | | | |
|  | | |  | | | |
|  | | |  | | | |
| Are providers licensed or authorized to issue policies in the Project location? | | | | | | Yes  No |
| Mailing Address  (principal place of business): | |  | | | | |
|  | | | | |
|  | | | | |
| Physical Address  (principal place of business): | |  | | | | |
|  | | | | |
|  | | | | |
| Phone (main): |  | | Phone (claims): | |  | |

1. Experience
2. Provide information regarding the Business’s previous contracting experience.

|  |
| --- |
| Years of experience with projects like the proposed project: |
| Has Business, or a predecessor in interest, or an affiliate identified in Paragraph 1.03: |
| Been disqualified as a bidder by any local, state, or federal agency within the last 5 years?  Yes  No |
| Been barred from contracting by any local, state, or federal agency within the last 5 years?  Yes  No |
| Been released from a bid in the past 5 years?  Yes  No |
| Defaulted on a project or failed to complete any contract awarded to it?  Yes  No |
| Refused to construct or refused to provide materials defined in the contract documents or in a change order?  Yes  No |
| Been a party to any currently pending litigation or arbitration?  Yes  No |
| Provide full details in a separate attachment if the response to any of these questions is Yes. |

1. List all projects currently under contract in Schedule A and provide indicated information.
2. List a minimum of three and a maximum of six projects completed in the last 5 years in Schedule B and provide indicated information to demonstrate the Business’s experience with projects similar in type and cost of construction.
3. In Schedule C, provide information on key individuals whom Business intends to assign to the Project. Provide resumes for those individuals included in Schedule C. Key individuals include the Project Manager, Project Superintendent, Quality Manager, and Safety Manager. Resumes may be provided for Business’s key leaders as well.
4. Required Attachments
5. Provide the following information with the Statement of Qualifications:
   * 1. If Business is a Joint Venture, separate Qualifications Statements for each Joint Venturer, as required in Paragraph 1.02.
     2. Diverse Business Certifications if required by Paragraph 3.01.
     3. Certification of Business’s safety performance if required by Paragraph 4.02.
     4. Financial statements as required by Paragraph 5.01.
     5. Attachments providing additional information as required by Paragraph 8.02.
     6. Schedule A (Current Projects) as required by Paragraph 8.03.
     7. Schedule B (Previous Experience with Similar Projects) as required by Paragraph 8.04.
     8. Schedule C (Key Individuals) and resumes for the key individuals listed, as required by Paragraph 8.05.
     9. Additional items as pertinent.

This Statement of Qualifications is offered by:

|  |  |
| --- | --- |
| Business: |  |
|  | *(typed or printed name of organization)* |
| By: |  |
| *(individual’s signature)* |
| Name: |  |
| *(typed or printed)* |
| Title: |  |
| *(typed or printed)* |
| Date: |  |
| *(date signed)* |
| *(If Business is a corporation, a partnership, or a joint venture, attach evidence of authority to sign.)* | |
| Attest: |  |
| *(individual’s signature)* |
| Name: |  |
| *(typed or printed)* |
| Title: |  |
|  | *(typed or printed)* |
| Address for giving notices: | |
|  |  |
|  |  |
| Designated Representative: | |
| Name: |  |
| *(typed or printed)* |
| Title: |  |
| *(typed or printed)* |
| Address: | |
|  |  |
|  |  |
| Phone: |  |
| Email: |  |

**“SCHEDULE A” must be completed and submitted:**

Schedule A—Current Projects

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |
|  | | | | | | | | | | |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |
|  | | | | | | | | | | |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |

**“SCHEDULE B” must be completed and submitted:**

Schedule B—Previous Experience with Similar Projects

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |
|  | | | | | | | | | | |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |
|  | | | | | | | | | | |
| Name of Organization |  | | | | | | | | | |
| Project Owner |  | | | | Project Name |  | | | | |
| General Description of Project | |  | | | | | | | | |
| Project Cost |  | | | | Date Project Completed | | |  | | |
| Key Project Personnel | Project Manager | | | Project Contact | | | | | Other | |
| Name |  | | |  | | | | |  | |
| *Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)* | | | | | | | | | | |
|  | Name | | Title/Position | | Organization | | Telephone | | | Email |
| Project Manager |  | |  | |  | |  | | |  |
| Project Contact |  | |  | |  | |  | | |  |
| Other |  | |  | |  | |  | | |  |

**“SCHEDULE C” must be completed and submitted:**

Schedule C—Key Individuals and References

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Manager** | | | |
| Name of individual | |  | |
| Years of experience as project manager | |  | |
| Years of experience with this organization | |  | |
| Number of similar projects as project manager | |  | |
| Number of similar projects in other positions | |  | |
| *Current Project Assignments* | | | |
| Name of assignment | | Percent of time used for this project | Estimated project completion date |
|  | |  |  |
|  | |  |  |
| *Reference Contact Information (listing names indicates approval to contact named individuals as a reference)* | | | |
| Name |  | Name |  |
| Title/Position |  | Title/Position |  |
| Organization |  | Organization |  |
| Telephone |  | Telephone |  |
| Email |  | Email |  |
| Project |  | Project |  |
| Candidate’s role on project |  | Candidate’s role on project |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Project Contact** | | | | |
| Name of individual | |  | | |
| Years of experience as project superintendent | |  | | |
| Years of experience with this organization | |  | | |
| Number of similar projects as project superintendent | |  | | |
| Number of similar projects in other positions | |  | | |
| *Current Project Assignments* | | | | |
| Name of assignment | | Percent of time used for this project | | Estimated project completion date |
|  | |  | |  |
|  | |  | |  |
| *Reference Contact Information (listing names indicates approval to contact named individuals as a reference)* | | | | |
| Name |  | Name |  | |
| Title/Position |  | Title/Position |  | |
| Organization |  | Organization |  | |
| Telephone |  | Telephone |  | |
| Email |  | Email |  | |
| Project |  | Project |  | |
| Candidate’s role on project |  | Candidate’s role on project |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Other** | | | | |
| Name of individual | |  | | |
| Years of experience as project superintendent | |  | | |
| Years of experience with this organization | |  | | |
| Number of similar projects as project superintendent | |  | | |
| Number of similar projects in other positions | |  | | |
| *Current Project Assignments* | | | | |
| Name of assignment | | Percent of time used for this project | | Estimated project completion date |
|  | |  | |  |
|  | |  | |  |
| *Reference Contact Information (listing names indicates approval to contact named individuals as a reference)* | | | | |
| Name |  | Name |  | |
| Title/Position |  | Title/Position |  | |
| Organization |  | Organization |  | |
| Telephone |  | Telephone |  | |
| Email |  | Email |  | |
| Project |  | Project |  | |
| Candidate’s role on project |  | Candidate’s role on project |  | |

**“LINKS TO WORK EXAMPLES” must be completed and submitted:**

Links to Work Examples

Please provide links to portfolios and/or video work below: