

ATTACHMENT 17.32: QUALITY ASSURANCE TESTER - REFERENCE FORM

Bidder Instructions: Complete items 1-5 of this Attachment, ATTACHMENT 17.32: QUALITY ASSURANCE TESTER - REFERENCE FORM. One (1) form must be used for each corresponding ATTACHMENT 17.31: QUALITY ASSURANCE TESTER - 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 17.31: QUALITY ASSURANCE TESTER - QUALIFICATIONS FORM. Bidder must submit a copy of the completed ATTACHMENT 17.31: QUALITY ASSURANCE TESTER - QUALIFICATIONS FORM and the corresponding ATTACHMENT 17.32: QUALITY ASSURANCE TESTER - REFERENCE FORM, to the staff's reference(s) for completion.

Instructions to the staff's Reference: Using the rating scale in the "Reference Satisfaction Rating" field, rate your satisfaction with the staff that performed the services described in ATTACHMENT 17.31: QUALITY ASSURANCE TESTER - QUALIFICATIONS FORM. Complete and date this Attachment and return the form(s) to the Bidder.

Reference Form		
1	Bidder:	
2	Bidder's Key Staff Name:	
3	Project Name:	
4	Company Name of key staff's reference:	
5	Contact Name and 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 knowledge and experience for their project role?	0 1 2 3
8	How would you rate the individual's verbal and written communication skills?	0 1 2 3
9	How would you rate the individual's ability to perform duties to your satisfaction?	0 1 2 3

By completing this reference form, I declare the following:

1. I have reviewed the information contained in items 1-9 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:	

DECLARATION OF REVIEW AND CORRECT INFORMATION
Reference Email:
Reference Phone: