

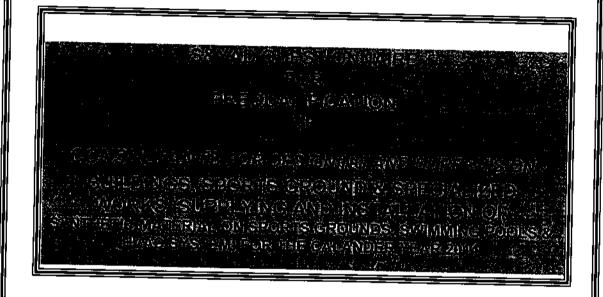
SPORTS & YOUTH AFFAIRS DEPARTMENT

QUESTIONNAIRE FOR PREQUALICATION FOR CONSULTANTS

Issued to M/s _____

ENGINEERING WING SPORTS & YOUTH AFFAIRS DEPARTMENT GOVERNMENT OF SINDH, KARACHI.

GOVERNMENT OF SINDH



SPORTS & YOUTH AFFAIRS DEPARTMENT GOVERNMENT OF SINDH, KARACHI

FORMAT OF SHORT CV OF PRINCIPAL STAFF

1.	Name	
2.	Profession / Experience	
3.	Date of Birth	
4.	Years with the Firm	
5 .	Nature of Experience in this firm and others	
6.	Membership of Professional Societies	,
7.	Education	:
8.	Other Training	
9.	Knowledge of Languages	:
10.	Key Qualification (Maximum 3/4 of a page)	:

[Na	me of Depart	tment / Ent	tity]	Form B-1
Ass Pro Dat	signment ject e	: :		- -
			INFORMATION FORM	_
1.	Name of C	onsultant	[Lead Partner if Association]	
c	Address			
0	Telephone	No(s)		
0	Fax Numbe	ers		
0	aii / ida			
0	Registration	n No. with	PEC alongwith Registered Office Address.	
2.	Description	of Consult	ting Firm (Ownership/ Organization)	
3.	Experience	(Number o	of Years)	
0	Local/ Natio			
0	Internationa	1		
0	Regional (W	ithin the C	ountry-details)	
4. Na the	me(s) and Ad ir role in the .	ddress (es) JV/ Associa) of Associates, if a JV, their short description and des	cription of
5. Ex	perience of th	ne Consulta	ants (on appended forms) during the past 10 years:	
	o Specific		(3-5 Projects of similar magnitude and complexity	
	o General		(10-20 Projects)	
			(14 16) rojectaj	
	(in all fields b	out not com	pletely relevant)	
6. c	Organization (Chart Show	ving Consultant's Structure.	

S&YAD Pre-qualification Form for Consultants

- 7. Capital of Consultant (Financial Statements for the latest three years).
 - Subsidiaries and Associates.
 - Annual Fees in the last five years in current in Index.
 - o Financial reference [Name / Address of Bank(s)]
- Professional Staff available for the assignment on the appended format. 8.

(The client entity should provide the essential disciplines between 3 to 5 in numbers).

9. Additional information.

Yours truly,

Name of Authorized Representative Position Dated

Form B-2

EXPERIENCE OF CONSULTANT

Relevant services carried out in the last 7-10 years which best illustrate qualification. [NAME OF THE FIRM / CONSULTANT]

1.	Name of Assignment	

2. Country

3. Name of Client

4. Address

5. Start Date : Month / Year

6. Completion Date : Month / Year

7. Professional Staff Provided .

8. No. of Staff

9. No. of Staff Months

10. Approx: Value of Services

11. Name of Other JV Firms (if any).

No. of Staff /Staff Months
 Provided by the JV partner(s)

13. Name / Position Of key Staff

14. Description of Project

15. Description of Service Provided by the Firm

FORMAT OF CURRICULUM VITAE OF PROPOSED EXPERTS

1.	The Discipline / Expertise	ENTO	
2.	Name of the Firm	:	
3.	Name of Nominee		
4.	Date of Birth	·	
5.	Years with the Firm	· · · · · · · · · · · · · · · · · · ·	
6.	Nationality	· :	
7.	PEC Registration / Membership No.	· ;	
8.	Key Qualification	: (Provide an outline of the nominee's experience)	
9.	Academic Qualification	:	
10.	Employment Record	:	
		oficiency : (In Speaking, reading and writing as Excellent –Good – Fair – Poor)	
12. (Certification I the undersign these bio- data correctly describe	ed, certify that to the best of my knowledge and belief, my qualification and my experience.	,

Signature:

Date:

D/M/Y

SUMMARY LIST OF PROJECTS HANDLED BY THE FIRM

	\vdash	 		
		<u> </u>		N. S.
				Name
•				Name of the Project
				roject
				Location Country
				1 [
				Province
				Client
				Cost of the Project
				Start Completion
				Handed as: • Single Firm/:S • Lead Firm/:L • Joint Venture:J Partner
				Total Cost of Services
				Cost of Services Provided by the Firm
				Scope of Services Feasibility Survey& investigation :S Quality Control :Q Project Monkoring :M O & M. O & M. Costruction Supervision :C
				Scope of Project Components / Volume of Work etc.

Sports & Youth Affairs Department Government of Sindh

ANNEX-A Form A-3 Page 1 of 2

COMPARATIVE OVERVIEW OF FIRMS

			_	S. No
				Description / Items Comparison
	Group	Name of Firm		
	Group	/ Name of Firm /		Firme /
	Group	Name of Firm	(1000)	me / Groups
4	5	/ Name of Firm /		

A. Experience Firm

 Relevant Work Experience (Maximum 5 Projects for 100% Points).

ı		ı	,	ı	•	r
0&M	Quality Control	Construction Supervision	Procurement Services	Detailed Eng. Design	Survey & Investigation	Feasibility Studies
• •		• •	• •	• •	• •	
0	Q	ဂ	ס	O	S	77

Project Monitoring & Benefit Evaluation

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Form A-3 Page 2 of 2 **ANNEX-A**

COMPARATIVE OVERVIEW OF FIRMS

	Firm / Name of Firm /	dn
sdno	ne of	Group
Gr	Nar	ອ
Firms / Groups	Name of Firm / Name of F	Group
	Nai	S
	Name of Firm /	
	of	
	Name	Group
tion / Items Comparison		
Descrip		
S. No		

Quality of Principal Staff. (Maximum of 7 preferably 5). m

Education

- Basic Degree Additional
- **⊕**≘

Professional Experience ٨i

(No. of Years)

- Total Relevant General

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