

## Expression of Interest (EOI) Information sheet

**Conduct a Study on SMART Digital Classrooms in General Education and Development of a strategy for the implementation of SMART Digital Classroom Initiative.**

### 1. Project Data & Consulting Firm

<b>Contract Name:</b> Conduct a Study on SMART Digital Classrooms in General Education and Development of a strategy for the implementation of SMART Digital Classroom Initiative.	
<b>Contract Number:</b> ICTA/GOSL/CON/QBS/2016/121	
<b>Name of Consulting Firm:</b>	

### 2. Eligibility

#### Declaration

We hereby declare that:

1. We have read the advertisement, and the Terms of Reference (TOR), for this assignment;
2. We have not been engaged to prepare such TOR as a firm, subconsultancy, or joint venture; and
3. No full-time or part-time or contracted expert employed by our firm, sub consultancy, or joint venture has been engaged to prepare such TOR.

We further confirm that, if any of one or more of our experts is engaged to prepare TOR for any resulting assignment as part of our work product under the assignment to which this advertisement relates, our firm and any such expert(s) will be disqualified from short-listing and/or participation in such follow-on assignment.

Lead Firm	
Signed by:	
Position :	
Associate/Partner 1	
Signed by:	
Position :	
Associate/Partner 2	
Signed by:	
Position :	
Associate/Partner 3	
Signed by:	
Position :	

**3. Management Competence** (Please answer each question in one paragraph of 3-5 sentences)

3.1 If you are proposing an association such as subconsultancy or a joint venture (J/V), outline the rationale for and benefits of the “association.” Outline proposed management coordination of the “association,” including the role of each firm.

3.2 Does your firm/sub consultancy/joint-venture (J/V) have standard policies, procedures or practices in place that promote quality in: the workplace, your interaction with clients, and the outputs you produce? If yes, describe briefly.

3.3 Does your firm/subconsultancy/joint venture have a dedicated unit or staff solely responsible for quality assurance? If yes, describe briefly.

3.4 How will you ensure the quality of your firm’s/subconsultancy’s/join venture’s performance over the life of this assignment?

3.5 How will your firm/sub consultancy/joint venture deal with any complaints concerning the performance of the staff or the quality of the reports submitted for this consulting assignment? What internal controls are in place to address and resolve complaints?

#### 4. Technical Qualifications including Experience

Based on the attached reference project sheets and the firm's performance, highlight the technical qualifications including experience of your firm/sub consultancy/joint venture (maximum of 4 pages). When the firm submitting the information special attention should be given to the following areas;

1. Technical Qualification of the firm
2. Experience of the firm with projects of similar nature (Please provide evidence of at least **Three** Assignments )
3. Experience of the firm in the project country or in the region
4. Past experience with world bank & GOSL projects
5. Nature of the Firm (small/specialized/large)
6. Core business of the firm
7. Financial and administrative strength (Audited Financial Reports for last **Three** Years)
8. Firm's history-number of years in business
9. Degree of in-house quality control
10. Technical & managerial organization of the firm, staff strengths and capabilities & appropriate skills of firm's staff
11. Any other relevant information

## Project Sheets

Indicate up to 3 reference projects that the firm/sub consultancy/joint venture experiences are relevant.

### Project 1 of \_\_

Project Name			
Name of Client			
Country		Project location within Country	
Participation	<input type="checkbox"/>	As lead firm	
	<input type="checkbox"/>	As associate firm	
Value of Services		(LKR)	
Source of Financing			
Consultancy Services			
(i) No. of staff			
(ii) No. of person months			
Length of Consultancy Assignment			
Start Date		(dd/mm/yyyy)	
Completion Date		(dd/mm/yyyy)	
Name of Associate Firms (if any)			
No. of Person-Months of Professional Staff Provided by Associated Firm(s)			
Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed			
Detailed Description of the Project			
Detailed Description of the Actual Services Provided by your Firm			