

Expression of Interest (EOI) Information format for Consulting Firms

1. Project Data & Consulting Firm

| | |
|--------------------------------|--|
| Contract Name | |
| Contract Number | |
| Name of Consulting Firm | |

2. Eligibility

Declaration

We hereby declare that:

- (i) we have read the advertisement, including the terms of reference (TOR), for this assignment;
- (ii) we have not been engaged to prepare such TOR as a firm, sub consultancy, or joint venture; and
- (iii) 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 ensuing 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)

- a. 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.

- b. 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.

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

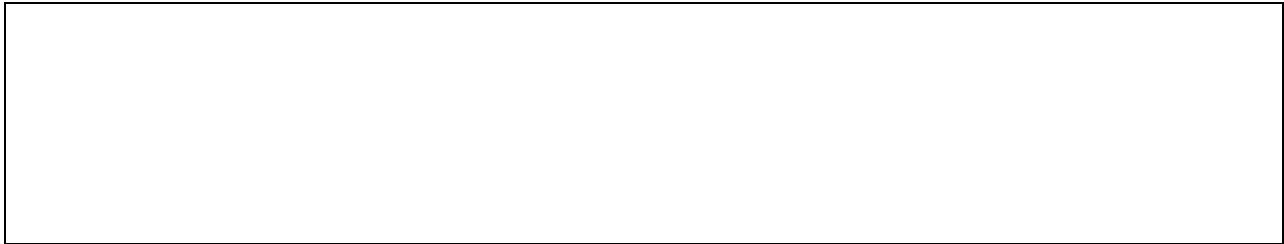
- d. How will you ensure the quality of your firm’s/sub consultancy’s/join venture’s performance over the life of this assignment?

- e. 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. Existence of the firm in the web development / web hosting industry
 - a. Less than 1 year
 - b. 1 -2 years
 - c. Above 3 years
2. Core business of the firm
3. Does the firm have experience of similar nature in projects
 - i. Yes – Please give details (At Least 2 Projects – Use Annex 01)
 - ii. No
4. Does the firm have experience with similar project authorities
 - i. Yes - Please give details (at least 5 projects – Use Annex 02)
 - ii. No
5. Experience in deploying Applications in PaaS (Docker container) environment?
 - i. Yes - please give details (At least 2 projects)
 - ii. No
6. financial and administrative strength
7. Degree of in-house quality control
8. Technical & managerial organization of the firm, staff strengths and capabilities & appropriate skills of firm staff
9. Any other relevant information



(Annex 01)

Project Sheets

Indicate up to 5 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 | | (US\$) | |
| • 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 | | | |
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