

BAC Form C-2 (Statement of Ongoing and Completed Government and Private Contracts including contracts awarded but not yet started, if any, whether similar or not similar in nature)

Name of Consultant : _____
Business Address : _____

Name& Location of Project	Contact Person/Tel. No.	Classification (Government / Private)	Date of Contract	Type of Consulting Services	Amount of Contract	Contract Duration

Attachments:

- 1. Notice of Award and/or Contract**
- 2. Notice to Proceed**

Submitted by:

(Name of Representative of Bidder)

(Position)

BAC Form C-3 (Statement of Consultant confirming that those who will actually perform the services are registered professionals)

Date

MS. CORAZON G. CORPUZ
Officer-in-Charge
HOME GUARANTY CORPORATION (HGC)
Jade Building, 335 Sen. Gil Puyat Avenue
Makati City

Attention : THE CHAIRMAN
Bids and Awards Committee (BAC)

Gentlemen:

This is to certify that the following personnel who will perform the service are registered professionals authorized by the appropriate regulatory body to practice those professions and allied professions:

Name of Personnel	Assignment
1.	Team Leader/Consultant
2.	Member
3.	Member
4.	Member
5.	Member
6.	Member

Attach for reference are the Curriculum Vitae (BAC Form C-7) of the above-mentioned personnel.

Very truly yours,

Printed name and signature of
Authorized representative

BAC Form C-4 (List of Ongoing /Completed/Relevant Engagement)

Using the format below, provide information on each assignment for which your firm/entity, either individually as a corporate entity or as one of the major companies within an association, was legally contracted.

Assignment Name:		Country:
Location within Country:		Professional Staff Provided by Your Firm/Entity(profiles):
Name of Client:		Nº of Staff:
Address:		Nº of Staff-Months; Duration of Assignment:
Start Date (Month/Year):	Completion Date (Month/Year):	Approx. Value of Services (in Current US\$):
Name of Associated Consultants, If Any:		Nº of Months of Professional Staff Provided by Associated Consultants:
Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed:		
Narrative Description of Project:		
Description of Actual Services Provided by Your Staff:		

Firm's Name: _____

BAC Form C-5 (List of Key Officials/personnel to be assigned to the Engagement)

1. Technical/Managerial Staff					
Name	Position	Task	Degree	Years of Relevant Experience	Relevant Trainings

2. Support Staff					
Name	Position	Task	Degree	Years of Relevant Experience	Relevant Trainings

Firm's Name: _____

BAC Form C-7(Curriculum Vitae)

Proposed Position: _____

Name of Firm: _____

Name of Staff: _____

Profession: _____

Date of Birth: _____

Years with Firm/Entity: _____ Nationality: _____

Membership in Professional Societies: _____

Detailed Tasks Assigned: _____

Key Qualifications:

[Give an outline of staff member's experience and training most pertinent to tasks on assignment. Describe degree of responsibility held by staff member on relevant previous assignments and give dates and locations. Use about half a page.]

Education:

[Summarize college/university and other specialized education of staff member, giving names of schools, dates attended, and degrees obtained. Use about one quarter of a page.]

Employment Record:

[Starting with present position, list in reverse order every employment held. List all positions held by staff member since graduation, giving dates, names of employing organizations, titles of positions held, and locations of assignments. For experience in last ten years, also give types of activities performed and client references, where appropriate. Use about two pages.]

Languages:

[For each language indicate proficiency: excellent, good, fair, or poor in speaking, reading, and writing.]

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

[Signature of staff member and authorized representative of the firm]

Date: _____
Day/Month/Year

Full name of staff member: _____

Full name of authorized representative: _____