**Use this form to address Minimum Bidder Qualifications (Pass/Fail)**

**Bidder Name:**

In completing the form, please provide **clear and accurate descriptions of the Bidder’s experience for the second, third, fourth and fifth Minimum Qualifications.** ITS will not interpret omissions and vagueness in the Bidder’s favor. Further, in completing the form, type to expand response areas on form or attach additional sheets, as necessary.

**Minimum Bidder Qualifications (Company)**

Failure to meet all requirements in this Attachment 20 **will** result in the Proposal being deemed non-responsive and eliminated from consideration

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| **Qualification 1:** Bidder, at time of bid submission and throughout the term of the Contract, must be registered and authorized by the New York State Secretary of State, to conduct business in New York State. | |
| **The Bidder certifies that it is registered to conduct business in the State of New York.** | **Yes  No** |

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| **Qualification 2:** The Bidder must represent and warrant that it possesses at least eight (8) years of experience in providing/supplying technical support personnel which are the subject matter of this RFP, for the benefit of its customers (customer placements).  ITS reserves the right to contact the Client Points of Contact to validate experience  \*The Bidder may add more engagements as necessary to show experience. However, the bidder should only provide engagements needed to meet the minimum. | | |
| **The Bidder represents and warrants that it possesses at least eight (8) years of experience in providing/supplying technical support personnel which are the subject matter of this RFP, for the benefit of its customers (customer placements) as evidenced by the information provided below.** | | **Yes  No** |
| **Engagement #1 Name** |  | |
| **Dates (month/year) of Experience (including date the engagement started and ended or is scheduled to end)** |  | |
| **# of Customer Placement made during term of the engagement?** |  | |
| **Client Name(s)** |  | |
| **Client Point of Contact** |  | |
| **Phone Number** |  | |
| **Email Address** |  | |
| **Provide a narrative explaining in detail how the customer placements provided during this engagement, meet the requirement of providing/suppling technical support personnel which are the subject of this RFP.** |  | |
| **Engagement #2 Name** |  | |
| **Dates (month/year) of Experience (including date the engagement started and ended or is scheduled to end)** |  | |
| **# of Customer Placement made during term of the engagement?** |  | |
| **Client Name(s)** |  | |
| **Client Point of Contact** |  | |
| **Phone Number** |  | |
| **Email Address** |  | |
| **Provide a narrative explaining in detail how the customer placements provided during this engagement, meet the requirement of providing/suppling technical support personnel which are the subject of this RFP.** |  | |
| **Engagement #3 Name** |  | |
| **Dates (month/year) of Experience (including date the engagement started and ended or is scheduled to end)** |  | |
| **# of Customer Placement made during term of the engagement?** |  | |
| **Client Name(s)** |  | |
| **Client Point of Contact** |  | |
| **Phone Number** |  | |
| **Email Address** |  | |
| **Provide a narrative explaining in detail how the customer placements provided during this engagement, meet the requirement of providing/suppling technical support personnel which are the subject of this RFP.** |  | |

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| **Qualification 3:** The Bidder must represent and warrant that it has fulfilled an average of fifty (50) customer placements across all customers over the last five (5) years.  \**The bidder may add more lines as necessary to show experience. However, the Bidder should only provide engagements needed to meet the minimum.* | | | | | |
| **The Bidder represents and warrants that it has fulfilled an average of fifty (50) customer placements across all customers over the last five (5) years.** | | | | | **Yes  No** |
| **May 1, 2022 through April 30, 2023- Total Number of Customer Placements** | | | | |  |
| **Client Name** |  | | **Number of Customer Placements** | |  |
| **Client Name** |  | | **Number of Customer Placements** | |  |
| **Client Name** |  | | **Number of Customer Placements** | |  |
| **Client Name** |  | | **Number of Customer Placements** | |  |
| **May 1, 2021 through April 30, 2022 – Total Number of Customer Placements** | | | | |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **May 1, 2020 through April 30, 2021 – Total Number of Customer Placements** | | | | |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **May 1, 2019 through April 30, 2020 – Total Number of Customer Placements** | | | | |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **May 1, 2018 through April 30, 2019 – Total Number of Customer Placements** | | | | |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Client Name** | |  | | **Number of Customer Placements** |  |
| **Total Number of Customer Placements Over the Last Five Years *(May 1, 2018 to April 30, 2023)*** | | | | |  |
| **Average Number of Customer Placements Over the Last Five Years *(Total Number of Customer Placements Over the Last Five Years divided by 5)*** | | | | |  |

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| **Qualification 4:** The Bidder must have placed at least 100 consultants total with Government agencies over the last five (5) years with at least fifty (50) consultants of which must have been placed in New York government entities. Placements in New York (NY) State government, county government in NY state and municipal (city, town, etc.) government in NY state can be used to meet this requirement.  ITS reserves the right to contact the Government Agency, Department or Office to validate experience  \*The Bidder may add more lines as necessary to show experience. Bidder should only provide engagements needed to meet the minimum. | | | | |
| **The Bidder represents and warrants that it has placed at least 100 consultants total with Government agencies over the last five (5) years with at least fifty (50) consultants of which must have been in New York as evidenced by the information provided below.** | | | | **Yes  No** |
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| **Government Agency, Department or Office Name** | **Point of Contact** | **Contact Phone Number and Email** | **Number of Consultant Placements** | **Date of Placement** |
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| **Total Number of Consultant Placements with Government Agencies from 5/1/2018 thru 4/30/2023** | | | |  |
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| **Government Agency, Department or Office Name, in New York** | **Point of Contact** | **Contact Phone Number and Email** | **Number of Consultant Placements** | **Date of Placement** |
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| **Total Number of Consultant Placements with Government Agencies in New York from 5/1/2018 thru 4/30/2023** | | | |  |

**Qualification 5 Instructions:**

1. Complete the table provided below for each of bidder’s four (4) substantially similar Level II job titles. Indicate the Level II title from Appendix L and the substantially similar Level II title the bidder is putting forth. Also provide the total number of placements for the substantially similar Level II title in the last five year time period. (See RFP Section 3.1 and Appendix L for more information).
2. Provide for each of the bidder’s four (4) substantially similar Level II job titles, supporting information consisting of the Client Name, Point of Contact, Contact Phone Number and Email, Number of Consultant Placements and the Date Of Placement where indicated.
3. In the field entitled “Bidder’s Substantially Similar Level II Title Narrative” provide a detailed narrative explaining how the bidder’s substantially similar Level II title is actually substantially similar to the titles shown in Appendix L and meets the Level II requirements in RFP Section 3.1.

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| **Qualification 5:**Bidder must have placed a total of fifteen (15) Level II placements among four (4) substantially similar titles, meeting the minimum requirements set forth in Section 3.1 of this RFP, and as specified in Appendix L, over the last five (5) years.  ITS reserves the right to contact the Clients Point of Contact to validate experience  \*The Bidder may add more lines as necessary to show experience. Bidder should only provide engagements needed to meet the minimum. | | | | | |
| **The Bidder represents and warrants that it has placed a total of fifteen (15) Level II consultants, among four (4) substantially similar titles, meeting the minimum requirements set forth in Section 3.1 of this RFP and as specified in Appendix L, over the last five (5) years, as evidenced by the information provided below.** | | | | | **Yes  No** |
| 1. **Level II Title From Appendix L:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   **Bidder’s Substantially Similar Level II Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Total Number of Placements for This Title From 5/1/2018 thru 4/30/2023:\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Client Name** | **Point of Contact** | **Contact Phone Number and Email** | | **Number of Consultant Placements** | **Date of Placement** |
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| **Bidder’s Substantially Similar, Level II Title Narrative:** | |  | | | |
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| 1. **Level II Title From Appendix L:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   **Bidder’s Substantially Similar, Level II Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Total Number of Placements for This Title From 5/1/2018 thru 4/30/2023:\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Client Name** | **Point of Contact** | **Contact Phone Number and Email** | | **Number of Consultant Placements** | **Date of Placement** |
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| **Bidder’s Substantially Similar, Level II Title Narrative:** | |  | | | |
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| 1. **Level II Title From Appendix L:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   **Bidder’s Substantially Similar, Level II Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Total Number of Placements for This Title From 5/1/2018 thru 4/30/2023:\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Client Name** | **Point of Contact** | **Contact Phone Number and Email** | | **Number of Consultant Placements** | **Date of Placement** |
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| **Bidder’s Substantially Similar, Level II Title Narrative:** | |  | | | |
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| 1. **Level II Title From Appendix L:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   **Bidder’s Substantially Similar, Level II Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Total Number of Placements for This Title From 5/1/2018 thru 4/30/2023:\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Client Name** | **Point of Contact** | | **Contact Phone Number and Email** | **Number of Consultant Placements** | **Date of Placement** |
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| **Bidder’s Substantially Similar, Level II Title Narrative:** | | |  | | |
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