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| CONSULTANT INFORMATION | |
| Bidder: |  |

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| MINIMUM QUALIFICATIONS |
| *Please check all boxes that apply.*  Licensed to do business in the State of Washington. If not licensed, provide a written intent to become licensed in Washington within thirty (30) calendar days of being selected as the Apparent Successful Bidder.  Experience collecting and analyzing school facility construction project cost information.  Experience facilitating group discussion to glean information pertinent to the evaluation of school facility needs and construction costs which will be used to make funding decisions.  Experience developing recommendations, summaries, and reports reflecting data collection and group facilitation discussions. Including developing case studies showing impacts of funding decisions.  Experience presenting summaries and reports to various stakeholders.  Consultants who do not meet the minimum qualifications noted above will be rejected as non-responsive and will not receive further consideration. Any proposal that is rejected as non-responsive will not be evaluated or scored. |

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| ADDITIONAL DESIRED QUALIFICATIONS |
| *Please check all boxes that apply.*  Experience collecting and analyzing data from a variety of sources, including construction cost indices, stakeholder groups, and individual interviews.  Knowledge of the School Construction Assistance Program (SCAP) process, including eligible space calculations and cost calculations.  Knowledge and experience in the design of K-12 and early learning facilities. Including the use of prototypical plans.  Knowledge of state and local building codes and permitting issues.  Experience developing case studies and reports incorporating Geographical Information Systems (GIS) data and mapping.  Knowledge of Washington’s K-12 system, including school facility planning, school district capital levies and capital bond elections. |

*I certify under penalty of perjury of the laws of the State of Washington that the foregoing is true and correct.*

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Signature of Bidder Date Place Signed (City, State)

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Printed Name Title Organization Name