

## PRELIMINARY SCOPE OF SERVICES

\_\_\_\_\_  
**(Owner)**

\_\_\_\_\_  
**(Project)**

The \_\_\_\_\_, through its \_\_\_\_\_, is  
(owner) (governing body if applicable - i.e. Board of Directors)

in the process of selecting professional services for \_\_\_\_\_  
(project name)

\_\_\_\_\_. This project is \_\_\_\_\_  
(location and brief description of project)

\_\_\_\_\_  
Additional information regarding this project, such as \_\_\_\_\_  
(i.e., maps, studies)

will be made available upon request.

The anticipated project time line is indicated on the attached Preliminary Schedule of Activities.

The firm selected will be involved in the following activities on behalf of the owner: (Examples: master planning, demolition, renovation, new construction, land use, environmental, waste management, etc.) \_\_\_\_\_  
\_\_\_\_\_

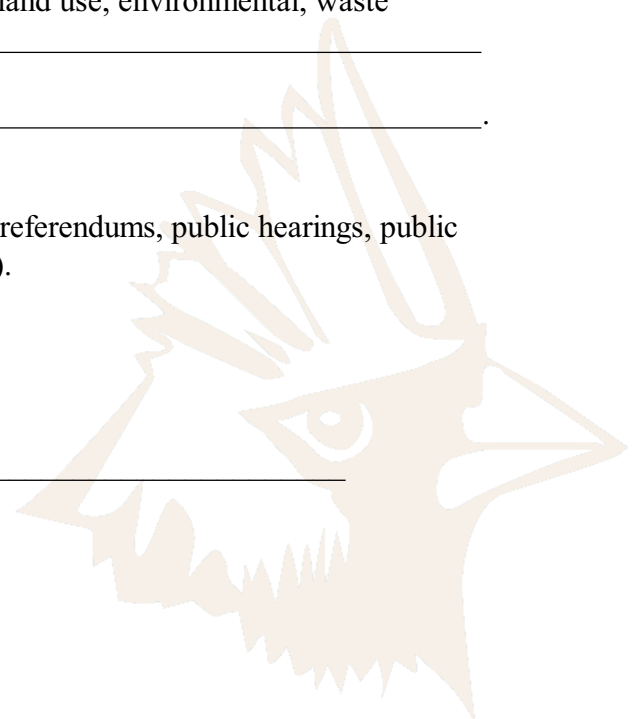
The firm will also be required to participate in: (Examples: referendums, public hearings, public information meetings, plan commission meetings, BZA, etc.).

For additional information contact:

Name: \_\_\_\_\_  
*Owner's Representative*

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_



## SAMPLE REQUEST FOR STATEMENT OF QUALIFICATIONS

TO: \_\_\_\_\_  
(Professional Service Firm)

FROM: \_\_\_\_\_  
(Owner)

PROJECT: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

RE: REQUEST FOR STATEMENT OF QUALIFICATIONS

Your firm is invited to submit your Statement of Qualifications to become eligible to be selected to provide professional services.

Your Statement of Qualifications should include the following information:

- 1) Name, address and brief description of firm.
- 2) Resumes of key personnel to be assigned to this project.
- 3) A one-page narrative as to firm's interest, particular abilities and qualifications related to this project.
- 4) Description of other projects designed by this firm and key personnel pertinent to this project. Include reference contact information.
- 5) Examples of knowledge, expertise and/or experience with other related work.

For firms that are Short-listed for an interview, a tour of the facility and/or site will be arranged if necessary.

The selection committee includes: \_\_\_\_\_  
(city engineer, city planner, company CEO and other concerned parties)

\_\_\_\_\_ copies of your Statement of Qualifications should be forwarded to the following address - and must be received no later than \_\_\_\_\_ a.m./p.m. on \_\_\_\_\_.

TO: \_\_\_\_\_  
Owner's Representative

\_\_\_\_\_ Title

\_\_\_\_\_ Address

\_\_\_\_\_ City State Zip

\_\_\_\_\_ Telephone Number

\_\_\_\_\_ Fax Number

## SCHEDULE OF ACTIVITIES

The following professional selection schedule has been established by:

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(Owner)

---

(Project)

- Dates
- \_\_\_\_\_ **STEP 1** - The owner establishes evaluation criteria
- \_\_\_\_\_ A preliminary scope of services in general terms is developed.
- \_\_\_\_\_ Owner identifies firms to receive Request for Statement of Qualifications (RFQ).
- \_\_\_\_\_ Mail Request for Statement of Qualifications (RFQ).
- \_\_\_\_\_ Statement of Qualifications due. Allow a minimum of 10 to 15 working days for firms to submit.
- \_\_\_\_\_ Develop a short list of three to five firms to be interviewed. Selection will be based on qualifications, references and experience compatible with the owner's project (see SOQ Evaluation on page 10).
- \_\_\_\_\_ Memo mailed to shortlisted firms advising them of the date for interview and pre-interview tour of site, if appropriate. Include interview questions and score sheet with Memo (see Sample Memo on page 12).
- \_\_\_\_\_ Memo mailed to all firms not shortlisted, informing them of firms selected for an interview and expressing appreciation for their interest (see Sample Memo on page 13).
- \_\_\_\_\_ Tour of site, if appropriate, should be scheduled at least 10 days prior to date of interview to allow for preparation.
- \_\_\_\_\_ Check references prior to the interview.
- \_\_\_\_\_ Interviews with shortlisted firms, ranking of firms and selection of the highest ranked firm.
- \_\_\_\_\_ Mail Memo to firms not selected, informing them of the results of the interviews and expressing appreciation for their involvement (see Sample Memo page 18).
- \_\_\_\_\_ **Step 2** - Meet with highest ranked firm to define scope of the work.
- \_\_\_\_\_ Negotiate contract terms.
- \_\_\_\_\_ **Step 3** - Selected firm submits fee proposal based on finalized scope of work and contract terms.
- \_\_\_\_\_ Execute contract with selected firm.

## STATEMENT OF QUALIFICATIONS EVALUATION

This form is designed to provide your Selection Committee with the best criteria for rating the firms that have submitted a Statement of Qualifications for your project. You may elect to add, delete or modify some of the points in order to better meet your specific needs.

The Weight Column (1-10 points) is designed to allow your committee to predetermine the areas that the group feels have the highest level of importance (which would be 10) or lowest level (which would be 1) as related to your project. **It is extremely important that your committee agree on the WEIGHT for each item prior to doing your individual RATING.** Once your committee has agreed upon the WEIGHT for each of the items listed, copies of this form should be given to each committee member for their individual rating.

The Rating Column (1-5 points) should indicate your personal evaluation (in your judgment) of the individual firm's qualifications. Once both steps are completed, the totals should be calculated, and you then have the highest rated firms identified. The top rated firms are the ones from which you will make your selection for interviewing.

PROJECT \_\_\_\_\_

FIRM \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

	WEIGHT	X	RATING	=	TOTAL
	(1 to 10)		(1 to 5)		
1) Quality of firm's Statement of Qualifications (SOQ) in relationship to information requested.	_____	X	_____	=	_____
2) Firm's apparent knowledge of your project and your specific needs.	_____	X	_____	=	_____
3) Firm's individual team member's qualifications.	_____	X	_____	=	_____
4) Firm's experience in projects that are similar to your project.	_____	X	_____	=	_____
5) Firm's familiarity with local conditions, needs and requirements.	_____	X	_____	=	_____
6) Analysis of the firm's overall approach to your project	_____	X	_____	=	_____
			<b>GRAND TOTAL</b>		_____

\_\_\_\_\_  
Name of Committee Member

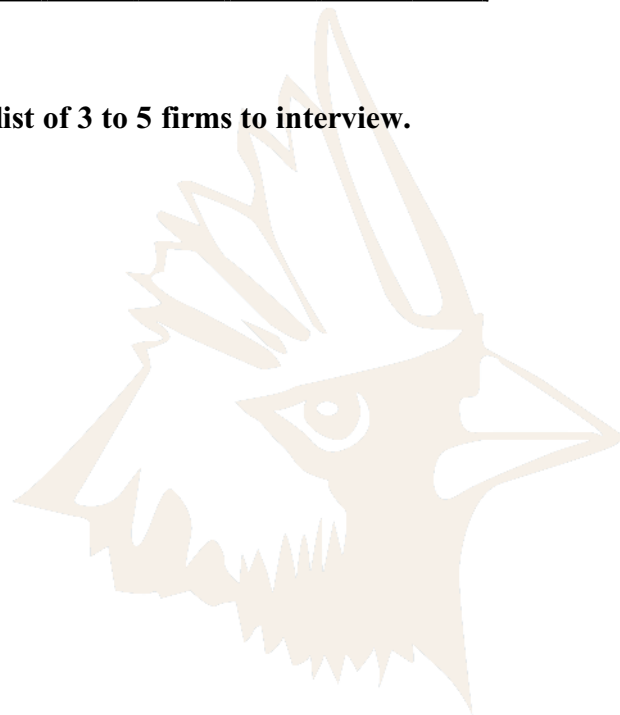
**QUALIFICATIONS EVALUATION SUMMARY**

(To be completed by Selection Committee Chairperson)

Enter the Grand Total from each committee member's SOQ evaluation sheet.

<b>Firms</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
<b>Committee Member 1</b>										
<b>Committee Member 2</b>										
<b>Committee Member 3</b>										
<b>Committee Member 4</b>										
<b>Committee Member 5</b>										
<b>Grand Totals</b>										

**Based on the results of your evaluation, prepare a short list of 3 to 5 firms to interview.**



**REFERENCE CHECK**

This form is designed for the Selection Committee to check references of “shortlisted” firms.

**Project**

\_\_\_\_\_

( for which the selection is being made)

**Firm**

\_\_\_\_\_

(for which the reference check is being conducted)

Reference Information:

Owner	_____	Project Referenced	_____
Address	_____	Person Contacted	_____
	_____	Phone	_____
		Fax	_____

**SAMPLE QUESTIONS:**

1. What was the scope of this firm’s services? (soils investigations, design work, construction phase services, studies, other (specify) \_\_\_\_\_  
 \_\_\_\_\_
2. Who was this firm’s Project Manager or primary contact? \_\_\_\_\_
3. When was the project completed? \_\_\_\_\_

**COMMENTS**

**CIRCLE ONE**

- |   |     |    |
|---|-----|----|
| 4. Was the project completed on time?   | YES | NO |
| 5. Was the project completed within budget?                                     | YES | NO |
| 6. Did this firm and you (the owner) work well as a team?                       | YES | NO |
| 7. Did this firm cover all of the project’s requirements?                       | YES | NO |
| 8. How would you rate this firm’s qualifications and fee structure? _____       |     |    |
| 9. What is your overall evaluation of this firm based on your experience? _____ |     |    |
| 10. Would you use this firm on a future project? _____                          |     |    |
| 11. Other questions/comments? _____   |     |    |

**SAMPLE MEMO TO FIRMS “SHORTLISTED” FOR AN INTERVIEW**

TO: \_\_\_\_\_  
(Professional Service Firm)

FROM: \_\_\_\_\_  
(Owner)

PROJECT: \_\_\_\_\_

RE: INTERVIEW SCHEDULE AND REQUIREMENTS FOR SHORTLISTED FIRMS

Congratulations! Your firm has been chosen to be interviewed by our Selection Committee.

Please find the following attached:

- 1) Interview Questions and Score Sheet which will be used by the interviewers.
- 2) Copies of \_\_\_\_\_ for your information and review.  
(name of studies or reports)

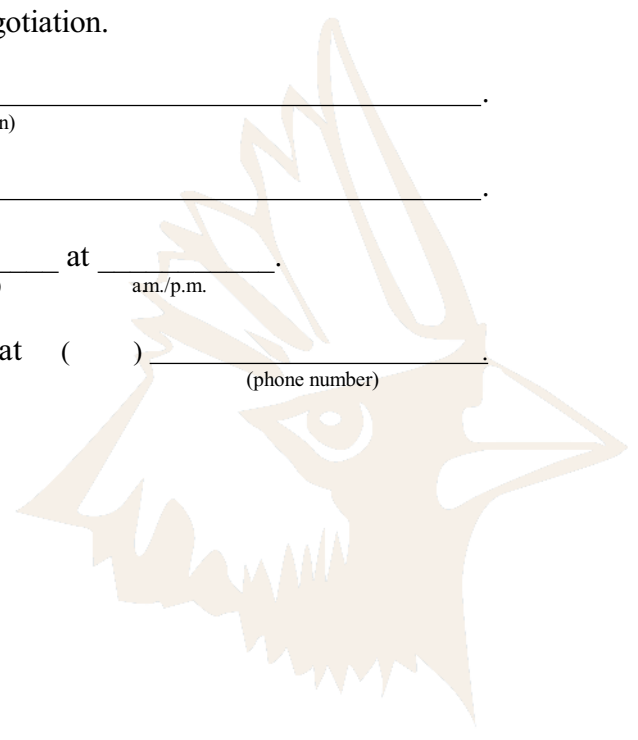
Each firm will be allowed 45 minutes to present their qualifications and answer questions. The interviewers will schedule 15 minutes between interviews for informal discussion of the information presented during the preceding interview. At the completion of the interviews, the committee will rank the firms. The firm deemed to be most qualified will then be invited to define the scope of work and negotiate contract terms. If contract terms cannot be reached, the firm deemed the next most qualified will be invited for scope definition and contract negotiation.

Interviews will be held at \_\_\_\_\_.  
(Location)

The order and time of interview is: \_\_\_\_\_.

A tour of the site, if appropriate, will be held on \_\_\_\_\_ at \_\_\_\_\_.  
(date) am./p.m.

Confirm arrangements with \_\_\_\_\_ at ( ) \_\_\_\_\_.  
(Owner’s Representative) (phone number)



**SAMPLE MEMO TO FIRMS “NOT SHORTLISTED” FOR AN INTERVIEW**

TO: \_\_\_\_\_  
(Professional Service Firm)

FROM: \_\_\_\_\_  
(Owner)

PROJECT: \_\_\_\_\_

RE: STATUS OF SELECTION PROCESS

We would like to express our appreciation to your firm for submitting your Statement of Qualifications.

We regret to inform you that after careful evaluation by the Selection Committee, your firm was not chosen for further consideration.

The following firms have been selected for interviews:

- 1)
  
- 2)
  
- 3)





## SAMPLE INTERVIEW QUESTIONS AND SCORE SHEETS

Project: \_\_\_\_\_

Firm: \_\_\_\_\_

Firms invited to interview for the captioned project should be prepared to speak about the issues listed on this page. (Expand questions as appropriate. These interview questions and score sheets should be attached to the memo sent to “shortlisted” firms).

### INSTRUCTIONS FOR THE SELECTION COMMITTEE

Using the following Weight/Rating System will allow you to quantify your interview results.

The highest number represents the most value for each column. **Weight column:** 1-10 points. **It is extremely important that your committee agree on the WEIGHT for each item prior to doing individual RATING.** **Rating column:** 1-5 points. In this column you rate the firm based on each qualification.

At the completion of the interview, multiply the weight by the rating for each category and enter the total. Add all totals to establish the grand total. The chairperson will combine all of the totals for those participating in the interview session on the Interview Evaluation Form (page 17).

	WEIGHT	X	RATING	=	TOTAL
	(1-10)		(1-5)		
1) <b>Understanding of Project Requirements:</b> (Owner may evaluate firm’s analysis, preparation and level of interest).	_____	X	_____	=	_____
2) <b>Approach/Methodology:</b> (Owner may evaluate firm or individual’s creativity and problem solving abilities).	_____	X	_____	=	_____
3) <b>Key Personnel and Roles:</b> (Owner may evaluate qualifications and professional skills of key individuals).	_____	X	_____	=	_____
4) <b>Firm’s Pertinent Experience:</b> (Owner may evaluate related projects presented as previous work of the firm).	_____	X	_____	=	_____
5) <b>Sub-Consultant vs. In-house Resources:</b> (Owner may evaluate firm’s in-house capabilities versus use of sub-consultants).	_____	X	_____	=	_____

	<b>WEIGHT</b>	<b>X</b>	<b>RATING</b>	<b>=</b>	<b>TOTAL</b>
	(1-10)		(1-5)		
6) <b>Project Management:</b> (Owner may evaluate firm's abilities related to technical functions such as project cost controls, scheduling, construction <u>observation</u> , etc.).	_____	X	_____	=	_____
7) <b>Communication Skills:</b> (Owner may evaluate firm's abilities to form successful working relationships and communicate with the owner).	_____	X	_____	=	_____
8) <b>References:</b> (Owner may evaluate results of reference checks).	_____	X	_____	=	_____
9) _____ (Other Owner Issues)	_____	X	_____	=	_____
10) _____ (Other Owner Issues)	_____	X	_____	=	_____

TOTAL SCORE                     

COMMITTEE MEMBER \_\_\_\_\_



## INTERVIEW EVALUATION

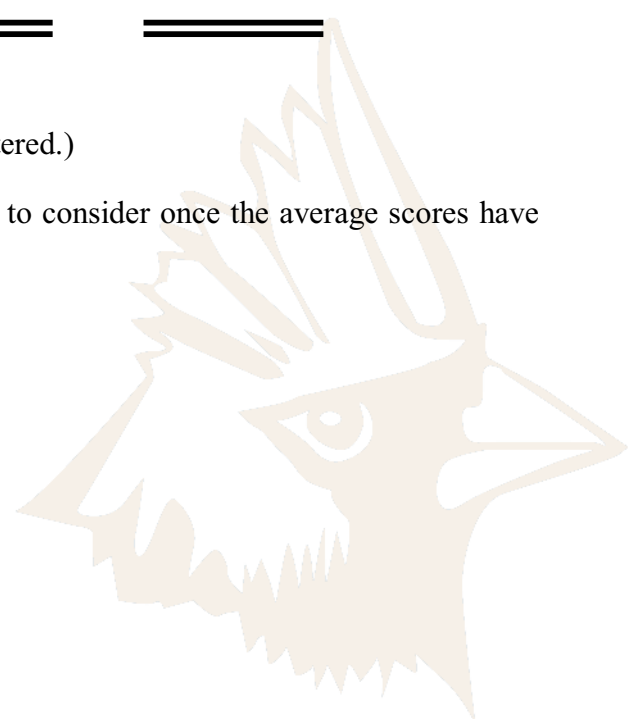
For use by the chairperson to compile all scores of individuals participating in the interview process.

Enter the total score for each firm as recorded by each committee member on their Interview Question and Score Sheet. This provides an average score in the event all firms are not interviewed by all committee members.

		<b>COMMITTEE MEMBER</b>	<b>FIRM A SCORE</b>	<b>FIRM B SCORE</b>	<b>FIRM C SCORE</b>
Member	1		_____	_____	_____
Member	2		_____	_____	_____
Member	3		_____	_____	_____
Member	4		_____	_____	_____
Member	5		_____	_____	_____
		<b>Grand Total</b>	<b>_____</b>	<b>_____</b>	<b>_____</b>
		<b>Average</b>	<b>=====</b>	<b>=====</b>	<b>=====</b>

(AVERAGE = Grand Total divided by number of scores entered.)

NOTE: Your Selection Committee may have other factors to consider once the average scores have been determined.



**SAMPLE MEMO TO FIRMS NOT SELECTED**

TO:

\_\_\_\_\_  
(Send to each individual firm)

FROM:

\_\_\_\_\_

PROJECT:

\_\_\_\_\_

RE:

STATUS OF SELECTION PROCESS

We have completed our selection process regarding professional services for the above named project.

It has been our objective to select the most qualified firm to perform the services. Based on the results of our selection process, we have now entered into contract negotiations with

\_\_\_\_\_  
(Professional Service Firm)

We express our sincere appreciation for your interest, time, and effort invested on our behalf.



**INDIANA QBS AWARD**  
**Sample Nomination Form**

*(Please refer to instructions on the back of this page.)*

Government Sector

Non-Government Sector

1. Nominee \_\_\_\_\_

2. Position \_\_\_\_\_

3. Place of employment \_\_\_\_\_

4. Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

5. Contact Person \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

6. The nominee has made contributions in the following area(s)

\_\_\_ Advocacy Programs

\_\_\_ Publications

\_\_\_ Selection Practice

\_\_\_ Legislation

\_\_\_ Public Affairs

\_\_\_ Policy Regulations

\_\_\_ Other \_\_\_\_\_

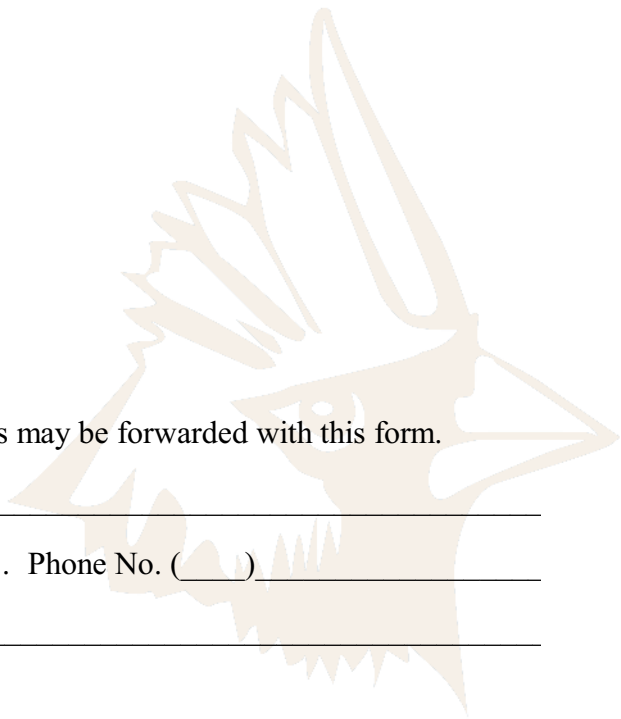
7. In 100 words or less, please explain the nominee's qualifications for this award.

8. Additional letter of nomination and supporting documents may be forwarded with this form.

9. This nomination was submitted by \_\_\_\_\_

10. Firm name \_\_\_\_\_ 11. Phone No. (\_\_\_\_\_) \_\_\_\_\_

12. Project team members \_\_\_\_\_



## INSTRUCTIONS FOR COMPLETING FORM

1. If group, enter the name of the group being nominated.  
If individual, enter the name of the individual being nominated.  
Place an “X” in the box at the top of the form to indicate if group or individual works in the **government** or **non-government sector**.
2. If group, leave blank.  
If individual, enter their position.
3. If group, leave blank.  
If individual, enter their place of employment.
4. Enter address, city, state, zip, phone number of group or individual.
5. If group, enter the name and phone number of an individual with the group who can provide additional information regarding the group being nominated and/or the procurement process being used.
6. Indicated area(s) in which group or individual has made contributions.
7. In 100 words or less, explain the group’s or individual’s qualifications, including contributions in areas(s) indicated in #6. Use an additional sheet if space on the form is not adequate.
8. Any support documents or letters of nomination can be attached to this form.
9. Enter the name of the person who is submitting the nomination.
10. Enter the name of the firm that #9 is employed by.
11. Enter the firm phone number of the person in #9.
12. If nomination is made regarding a particular project, give the name of all consultants and major contractors involved in the project.

