

ATTACHMENT L-H

KEY PERSONNEL DESCRIPTION RESUMÉ FORM

PROPOSED POSITION TITLE: _____

PROPOSED POSITION ANNUAL SALARY: \$ _____

POSITION DESCRIPTION, INCLUDING RESPONSIBILITIES AND AUTHORITY: _____

NAME OF PROPOSED PERSON: _____

REASONS FOR ASSIGNING PROPOSED PERSON TO THIS POSITION: _____

PERCENT OF TIME PROPOSED PERSON WILL SPEND WORKING IN THIS POSITION:

LENGTH OF COMMITMENT PROPOSED PERSON WILL SPEND IN THIS POSITION:

PROPOSED PERSON:

HAS _____ HAS NOT _____ BEEN CONTACTED *AND*
IS _____ IS NOT _____ COMMITTED TO THE PROPOSED POSITION
HAS _____ HAS NOT _____ BEEN INCLUDED IN ANY CONCURRENT
PROPOSAL

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EDUCATION, CERTIFICATION, AND AWARDS

NAME: _____ **PROPOSED POSITION:** _____

EDUCATION

TYPE OF DEGREE	YEAR RECEIVED	MAJOR	COLLEGE/ UNIVERSITY	YEARS ATTENDED

PROFESSIONAL AND TECHNICAL TRAINING

TYPE OF TRAINING	WHERE RECEIVED	DATE

PROFESSIONAL REGISTRATION AND CERTIFICATIONS

TITLE	STATE-SOCIETY	YEAR

AWARDS, ACCOMPLISHMENTS, HONORS, OTHER RELEVANT RECOGNITION

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WORK EXPERIENCE

Start with the present position or most recent position. Continue in reverse chronological order and highlight changes in employment, significant changes in job descriptions and/or duties, and periods of unemployment. Supervisor and customer references will be contacted during the proposal evaluation. Do not submit work experience for time periods beyond ten (10) years from the proposal due date specified in the solicitation.

NAME: _____ **PROPOSED POSITION:** _____

A. DATE (MONTH AND YEAR): FROM: _____ TO: _____

B. TITLE: _____

C. EMPLOYER NAME: _____

ADDRESS: _____

SUPERVISOR'S NAME: _____ TELEPHONE NUMBER: _____

TYPE OF BUSINESS: _____

D. CONTRACT NUMBER OR PROJECT TITLE: _____

CO NAME: _____ TELEPHONE NUMBER: _____

COR NAME: _____ TELEPHONE NUMBER: _____

E. CUSTOMER REFERENCE NAME: _____

ADDRESS: _____

POSITION/TITLE: _____

TELEPHONE NUMBER: _____ EXTENSION NUMBER: _____

F. NUMBER OF EMPLOYEES SUPERVISED _____

G. STARTING SALARY: \$ _____ FINAL SALARY: \$ _____

H. BRIEF DESCRIPTION OF DUTIES: _____
