G.	STAFFING				
2.	Professional Staff Certification and Authorization Form				
Ins	cructions:				
a)	Complete one (1) Staff Certification and Authorization Form for EACH Professional staff being submitted.				
b)	Attach an <u>UPDATED</u> resume for <u>EACH</u> Professional staff being submitted in the Supplier of Works Application Form				
c)	Submit the original along with a photocopy OR a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public of Academic Qualification(s) AND/OR Certificate(s)				
	AND/OR License(s). (Unless previously submitted, verified and valid)				
d)	Submit the original along with a photocopy of a <u>picture identification with signature</u> <u>OR</u> a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public for <u>EACH</u>				
	Professional staff being submitted in the Supplier of Works Application Form. (Example Driver's License, Employee ID, National ID, Passport etc)				
3.	I hereby solemnly declare that I am currently (Name of Staff member)				
	employed to My current employment status with the Applicant as at Works Applicant seeking registration with PPC) (Name of Supplier of				
	is in a (Please tick)				
	Other(please specify) capacity for registration with the Public Procurement Commission (PPC).				
4.	I agree and certify that all representation / information made in my attached				
	(Name of Staff member)				
	updated resume best describes myself, qualifications and experience to the best of my knowledge. I have provided said Supplier of Works Applicant with my particulars which				
	include(s): (Please tick)				
Sign	ature Signature				
	(Staff member's Signature) (Director's / Authorized representative's Signature)				
Date					
	(dd / mm / yyyy) (dd / mm / yyyy)				

G.	STAFFING					
5.	Technical	(This page n	nay be copied as required	to provide information for a	additional staff members)	
Techn	ical staff includes:					
•	Individuals who have ben	efited from works related tertiary-lev	vel training.			
•	At the time of application, staff.	individuals who have a formal work	king relationship with the	Supplier of Works Applican	nt in a capacity such as Consultants, Full-time	or Part-time
Name	of Individual:			No. Y	Years with Applicant:	
					of last registration:	
		1				
Numbe	er of years practicing in profe	ssion:				
Acade	mic Qualifications (eg: Cert		Major Discipline		Accrediting Institution	
				/	<u> </u>	
	al Instructions:	TA CITY			•	
	· ·	regarding experience in EACH cate				
		ated resume to the Application Form				
∀ 1	Attach Academi	ic Qualification(s) and / or Profession	nai Association Certificate	e(s) / Licence(s).		
	Category Applied for List name of category)	No. of Years Experience in Category of Work	ı this	Position Held	Project Descrip	tion
					+	

 $^{** \}textit{Refer to Section III} of the \textit{Application Form for the Detailed Requirements for Registration}.$

Technical Staff Certification and Authorization Form **Instructions:** Complete one (1) Staff Certification and Authorization Form for **EACH** Technical staff being submitted. Attach an **UPDATED** resume for **EACH** Professional staff being submitted in the Supplier of Works Application Form Submit the original along with a photocopy OR a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public of Academic Qualification(s) AND/OR Certificate(s) AND/OR License(s). (Unless previously submitted, verified and valid) Submit the original along with a photocopy of a picture identification with signature OR a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public for EACH Technical staff being submitted in the Supplier of Works Application Form. (Example Driver's License, Employee ID, National ID, Passport etc) 7. (Name of Staff member) hereby solemnly declare that I am currently My current employment status with the Applicant as at employed to ___ (Name of Supplier of Works Applicant seeking registration with PPC) is in a (Please tick) □Full Time □Part Time □Contractual Date (dd/mm/yyyy) Other ______(please specify) capacity for registration with the Public Procurement Commission (PPC). 8. agree and certify that all representation / information made in my attached (Name of Staff member) updated resume best describes myself, qualifications and experience to the best of my knowledge. I have provided said Supplier of Works Applicant with my particulars which include(s): (Please tick) □Update Resume □ Academic Qualification(s) □Certificate(s) \square License(s) 9. Signature Signature (Staff member's Signature) (Director's / Authorized representative's Signature) Date Date (dd / mm / yyyy) (dd / mm / yyyy)

~	CUTTA	DESTRICT
G.	O I A	FFING

10. Supervisory

(This page may be copied as required to provide information for additional staff members)

Supervisory Staff includes:

- Individuals with appropriate experience in the construction industry with responsibility for on-site day-to-day activities.
- At the time of Application, individuals who have a formal working relationship with the Supplier of Works and/or Applicant in a capacity such as Consultants, Full-time or Part-time staff. Individuals may also be professionally and technically trained.

Name of Individual:	_ No. Years with Applicant:		
Number of years in construction industry:			
a) Name of Professional Registration Board:		Year of last registration:	
b) Name of Professional Association			
Educational Level Achieved (eg: High / Tech Sch., Cert., Dip., Bsc., Ma., Msc.)	Year Qualified	Accrediting Institution	
	/	<u>/</u>	

General Instructions:

- i) Complete the table below regarding experience in **EACH** category of work for which registration is being applied for.
- ii) Attach detailed and updated resume to the Application Form for **EACH** Professional Staff member submitted. **
- iii) Attach Academic Qualification(s) and / or Professional Association Certificate(s) / Licence(s). **

Category Applied for (List name of category)	No. of Years Experience in this Category of Work	Position Held	Project Description

 $^{** \}textit{Refer to Section III} of the \textit{Application Form for the Detailed Requirements for Registration}.$

G.	G. STAFFING			
11	Supervisory Staff Certification and Authorization Form			
Instru	actions:			
a)	Complete one (1) Staff Certification and Authorization Form for EACH Supervisory staff being submitted.			
b)	Attach an <u>UPDATED</u> resume for <u>EACH</u> Supervisory staff being submitted in the Supplier of Works Application Form			
c)	c) Submit the original along with a photocopy OR a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public of Academic Qualification(s) AND/OR			
	Certificate(s) AND/OR License(s). (Unless previously submitted, verified and valid)			
d)	Submit the original along with a photocopy of a <u>picture identification with signature OR</u> a copy certified, signed, sealed and dated by a Justice of the Peace / Notary Public for <u>EACH</u>			
	Supervisory staff being submitted in the Supplier of Works Application Form. (Example Driver's License, Employee ID, National ID, Passport etc)			
12.	Ihereby solemnly declare that I am currently (Name of Staff member)			
	(Name of Staff member)			
	employed to My current employment status with the Applicant as at			
	employed to My current employment status with the Applicant as at (Name of Supplier of Works Applicant seeking registration with PPC)			
	is in a Please tick)			
	Other(please specify) capacity for registration with the Public Procurement Commission (PPC).			
13.	Iagree and certify that all representation / information made in my attached			
	(Name of Staff member)			
	updated resume best describes myself, qualifications and experience to the best of my knowledge. I have provided said Supplier of Works Applicant with my particulars which			
	updated resume best describes mysen, quaintentions and experience to the best of my knowledge. I have provided said Supplier of Works Applicant with my particulars which			
	include(s): (Please tick)			
14.				
Cianat	Signatura			
Signat	ure Signature (Staff member's Signature) (Director's / Authorized representative's Signature)			
	(= ===================================			

Date

(dd / mm / yyyy)

Date

(dd / mm / yyyy)