**RFQ-FJ23-012 Outsourcing Industry Development Fund for Outsource Fiji**

**Service Provider Response Form**

(To be completed in full and returned on or before the Closing Date and Time specified in the RFQ)

**Service Provider Details**

|  |  |
| --- | --- |
| Company Name |  |
| ABN / Company Number / Registration Number |  |
| Company Address |  |
| Service Provider Representative Name and Title |  |
| Service Provider Representative Email |  |
| Service Provider Representative Phone |  |
| Names of Service Provider’s other key Officers/Directors/Owners |  |

**Response to Mandatory Criteria**

For this Response to be considered for assessment, the Service Provider must indicate their response to the mandatory items below.

|  |  |
| --- | --- |
|  | **Service Provider Response** |
| 1a. Do you have an existing Child Protection Policy and Code of Conduct? |  |
| 1b. If you answered **No** to question **1a**, are you willing to sign on to Palladium’s Policy and Code? |  |
| 2a. Do you have an existing Policy or Standard to Prevent Sexual Abuse and Harassment? |  |
| 2b. If you answered **No** to question **2a**, are you willing, are you willing to sign on to Palladium’s Policy or Standard to Prevent Sexual Abuse and Harassment? |  |
| 3a. Do you have an existing Occupational Health and Safety Policy? |  |
| 3b. If you answered **No** to question **3a,** are you willingto sign on to Palladium’s Occupational Health and Safety Policy? |  |

**Response to the Technical Evaluation Criteria**

Please provide your responses to the criteria in the space provided below. MDF, in its sole discretion, may exclude responses in excess of the maximum word limit from the technical assessment.

| **Criteria** | **Service Provider Response** |
| --- | --- |
| 1. **Organisational capability to deliver the requirements as described in this RFQ.** | Up to 800 words |
| **Approach to delivering the Services.** | Up to 800 words |
| **Qualifications and experience of proposed personnel.** | Up to 800 words |

**Financial Proposal**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item #** | **Item Description** | **Qty required** | **Unit Price in FJD (exc. VAT/GST)** | **Total VAT/GST (if applicable)** | **Total Price in FJD (inc. VAT/GST)** | **Service Provider notes if any** |
| 1. | All-inclusive Fee for Outsourcing Industry Development Fund for Outsource Fiji – in accordance with the specifications in the RFQ. |  |  |  |  |  |

Notes:

1. The Total Price is an all-inclusive amount and includes fees, personnel costs, and all other costs to deliver in full the required services specified in the RFQ.

**Service Provider Insurance Details**

(Please indicate your current level of cover for each insurance type).

|  |  |
| --- | --- |
| **Insurance** | **Amount** |
| Public Liability |  |
| Professional Indemnity |  |

**References**

(Please provide details of up to three referees we may contact in relation to your submission. We will not contact referees without first getting confirmation from you.)

|  |  |
| --- | --- |
| **Referee Name, Position Title and Organisation** | **Contact Details** |
|  |  |
|  |  |
|  |  |

**Declaration:**

I declare that I/we agree with the Terms and Conditions of the Request for Quote and that the information provided in this response form is accurate and correct.

**Insert Name and Signature**

Insert Position Title of Supplier Representative

Date: