

PANEL FOR PROFESSIONAL SERVICES PROVIDERS TO RENDER MULTI-DISCIPLINARY SERVICES FOR LEPELLE NORTHERN WATER COVERING: CIVIL, STRUCTURAL, MECHANICAL, ELECTRICAL, ELECTRONIC AND INSTRUMENTATION ENGINEERING & ENGINEERING MANAGEMENT SERVICES ON AN AS-AND-WHEN REQUIRED BASIS FOR A PERIOD OF 5 YEARS.

ANNEXURE "B" – CV Template – Project Engineer Electrical Engineering

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1. Personal information – Project Electrcial Engineer

	Surname	
	First names	
Personal Information:	Identity / Passport Number	
	Country Issued	
	Date of birth	
	Telephone number (land line)	
Contact Details:	Cell Number	
	Email Address	

2. Candidate background checks

Are you a South African citizen?	Yes	No
If no, what is your nationality?		
Do you have a valid work permit? (only if non-South African)	Yes	No
Are you currently in the employ of the state	Yes	No
If yes, please provide details		
Have you ever been charged and convicted with a criminal offence?	Yes	No
If yes, please provide details of offence and the sentence imposed:		
Do you have any pending criminal case against you?	Yes	No
If yes, please provide details		
Have you ever been dismissed for misconduct?	Yes	No
If yes, please provide details		
Do you have any pending disciplinary case against you?	Yes	No
If yes, please provide details		
Have you resigned from a recent job pending any disciplinary proceeding against you?	Yes	No
If yes, please provide details		

3. Candidate's Employment/Professional History

(Add additional entries if required. Please start with the most recent employment and include the start date (MM/YY) and end date (MM/YY) related to each employment under the first column.)

	Da	4.		Position Held	
	Da	ile			
			Description of your duties; highlighting experience relevant to the services required in this bid		
Sta	art	Er	nd		
М	Υ	М	Υ	Employer's Name	
				Employer's locality and contact details	
	Da	ite		Position Held	
			Description of your duties; highlighting experience relevant to the services required in this bid		
Sta	art	Er	nd		
М	Υ	М	Υ	Employer's Name	
				Employer's locality and contact details	
	Da	ite		Position Held	
			Description of your duties; highlighting experience relevant to the services required in this bid		
Start End		nd			
М	Υ	М	Υ	Employer's Name	
			Employer's locality and contact details		

Bidders must note that for evaluation purposes experience not relevant to services required in this bid will not be considered or counted in the overall number of years' experience.

4. Record of Candidate's Experience in Area of Expertise Required

Specific experience in Area of Expertise required	Insert area of expertise (i.e. drafting of legislation - Bills, Acts or Regulations; work which displays an understanding of the Schedule 3A public entity environment, social insurance environment, and the PFMA)	knowledge a	ds or less, please nd experience yo ality Evaluation C	ou have in th	e role selec	ted as per
	Years' experience [insert area of expertise]	<please clea<="" th=""><th>arly state the follo</th><th>wing informa</th><th>ation:</th><th></th></please>	arly state the follo	wing informa	ation:	
		Position held	Employer/ Organisation	Start date (MM/YY)	End date (MM/YY)	Total period (e.g. 3Y_6M)

5. Tertiary Qualifications

(Add entries if needed. Start from the most recent)

Qualification Awarded	
Name of Institution	
Date	
Qualification Awarded	
Name of Institution	
Date	
Qualification Awarded	
Name of Institution	
Date	
Qualification Awarded	
Name of Institution	
Date	

- · Copies of all qualifications must be attached.
- International qualifications must be accompanied by SAQA accreditation. Certificate of membership shall not be deemed as proof of educational qualification.

6. Membership of Professional Bodies

Professional body name	
Membership no	
Professional body name	
Membership no	
Professional body name	
Membership no	

7. References

(provide at last three references from the past 5 years)

1	Name	
	Organisation	
	Position	
	Dates	
	Contact telephone / Cell number	
2	Name	
	Organisation	
	Position	
	Dates	
	Contact telephone / Cell number	
3	Name	
	Organisation	
	Position	
	Dates	
	Contact telephone / Cell number	

8. List projects/assignments relevant to this bid that the proposed expert key personnel was involved in:

NAME OF CLIENT	CLIENT CONTACT PERSON & HER/HIS TELEPHONE OR CELLPHONE NUMBER	NAME OF PROJECT	ROLE & CONTRIBUTION OF KEY PERSONNEL TO THE PROJECT / ASSIGNMENT	PERIOD OF PROJECT EXECUTION
<u> </u>	1	1		

I hereby confirm that the above information is true and accurate and that my CV has not been submitted by another service provider for the same bid. Name:							
Signature:							
Date:							