CURRICULUM VITAE (CV) AND DETAILED QUALIFICATIONS OF THE CONSULTANT'S KEY ASSIGNED TEAM MEMBERS

Proposed Position: i.e. 6	OVERALL PRO	፲ <u>ድ</u> ርፕ ጠል፣	JACER	
Name of Firm:	SVERALL I RO	JECI MAI	IAGER	
Name of the Team Mem	ber:			
Date of Birth:				
Years with Firm/Entity:		Nation	nality:	
Membership in Profession	onal Societies:			
Detailed Tasks Assigned	l:			
Education: [Summarize college/university schools, dates attended, and				
School	Date attende	ed	Degre	ee obtained
as related to his/her function Starting with present position held by staff member to shou (2) years—giving dates, nam description of projects. (*Con	, list in reverse ord the length of expe es of employing org	rience and p ganizations,	rojects ha titles of po	indled in the past two
Name of Company	From	То		Position Held
1.				
2.				
3.				
Trainings: [Summarize the trainings, ser giving course, title, dates atte necessary.)				
Tr	aining		D	ate Attended

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	For each language,	indicate	proficiency:	excellent,	good,	fair,	or poor	in speak	ing,	reading,	and	writing.]
('*continue on separa	ate sheet	if necessary	J)								

Language	Proficiency

Major Accounts Handled: (*Continue on separate sheet if necessary)

The identified members of the proposed Quad-Media Monitoring team must have handled and completed at least two (2) research projects similar in nature to the requirement. List SIMILAR COMPLETED projects awarded on or after 20 October 2019 and completed on or before 20 October 2021.

Client Name	Name of Project	Period Covered / Inclusive Dates	Value of Contract	Nature of Services as Relevant to His Function in the Team

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

the Project), I firmly commit to assume the post of (de	-
Full name and signature of Team Member:	Date:
Full name and signature of authorized representative	Date: : Day/Month/Year

CURRICULUM VITAE (CV) AND DETAILED QUALIFICATIONS OF THE CONSULTANT'S KEY ASSIGNED TEAM MEMBERS

Proposed Position: i.e.	EVETEME MAN	ACFD	
Proposed Position: i.e. <u>\$</u> Name of Firm:	SISIEMS MAN	AGER	
Name of the Team Mem	her:		_
Date of Birth:			
Years with Firm/Entity:		Natio	nality:
Membership in Professio	onal Societies:		3
<u>-</u>			
Detailed Tasks Assigned	l:		
Education:			
[Summarize college/universit schools, dates attended, and	_		ion of Member, giving names of one quarter of a page.]
School	Date attend	ed	Degree obtained
*Provide Extra rows if ne			
	, list in reverse ord the length of expe es of employing or	ler every emp rience and p ganizations,	
Name of Company	From	То	Position Held
1.			
2.			
3.			
Trainings: [Summarize the trainings, ser giving course, title, dates atte necessary.)			led, facilitated or conducted, *continue on separate sheet if
Tr	aining		Date Attended

Α	Ν	Ν	EX
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	For each language,	indicate	proficiency:	excellent,	good,	fair,	or poor	in speak	ing,	reading,	and	writing.]
('*continue on separa	ate sheet	if necessary	J)								

Language	Proficiency

Major Accounts Handled: (*Continue on separate sheet if necessary)

The identified members of the proposed Quad-Media Monitoring team must have handled and completed at least two (2) research projects similar in nature to the requirement. List SIMILAR COMPLETED projects awarded on or after 20 October 2019 and completed on or before 20 October 2021.

Client Name	Name of Project	Period Covered / Inclusive Dates	Value of Contract	Nature of Services as Relevant to His Function in the Team

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

the Project), I firmly commit to assume the post of (de	
Full name and signature of Team Member:	Date:
Full name and signature of authorized representative	Date: : Day/Month/Year

CURRICULUM VITAE (CV) AND DETAILED QUALIFICATIONS OF THE CONSULTANT'S KEY ASSIGNED TEAM MEMBERS

Proposed Position: i.e. A	ACCOUNT MAN	AGER		
Name of Firm: Name of the Team Memb	ner•			
Profession:				
Date of Birth:				
Years with Firm/Entity:			nality:	
Membership in Professio	onal Societies:			
Detailed Tasks Assigned	:			
Education: [Summarize college/university schools, dates attended, and				
School	hool Date attended		Degr	ee obtained
*Provide Extra rows if ne	eeded			
as related to his/her function Starting with present position, held by staff member to show (2) years—giving dates, name description of projects. (*Cont	, list in reverse ord the length of expe es of employing org	rience and p ganizations,	projects h titles of p	andled in the past two
Name of Company	From	То		Position Held
1.				
2.				
3.				
Trainings: [Summarize the trainings, sen giving course, title, dates attennecessary.)				
Tra	aining]	Date Attended

Languages:

ANNF	X

[For each language, indicate proficiency: excellent, good, fair, or poor in speaking, reading, and writing.] (*continue on separate sheet if necessary)

Language	Proficiency

Major Accounts Handled: (*Continue on separate sheet if necessary)

The identified members of the proposed Quad-Media Monitoring team must have handled and completed at least two (2) research projects similar in nature to the requirement. List SIMILAR COMPLETED projects awarded on or after 20 October 2019 and completed on or before 20 October 2021.

Client Name	Name of Project	Period Covered / Inclusive Dates	Value of Contract	Nature of Services as Relevant to His Function
				in the Team

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

In the event that (Name of Bidder) is awarded the cont the Project), I firmly commit to assume the post of (des	
Full name and signature of Team Member:	Date: Day/Month/Year
Full name and signature of authorized representative:	Date: Day/Month/Year