|  |
| --- |
| **Instructions for Client Referee**  - Referee reports must be for deliverables completed within the last three (3) years.  - Referee reports must be completed by the Client referee and include contact details. **Reports completed by the Applicant will not be accepted.**  - Referee reports may cover more than one category.  - Referee reports must clearly indicate the category/ies to which it applies.  - Client referees must be prepared to be contacted to verify or clarify information provided in this report. |

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| **Instructions for Applicant**  - Required for applications to the Advanced Registered Supplier List.  - For each nominated high-level category: The Applicant must provide two (2) Referee Reports merged into one (1) file for submitting with their application.  - Referee reports may cover more than one category.  - Referee reports must clearly indicate the category/ies to which it applies.  - Referee reports must be completed by the client referee. Reports completed by the Applicant will not be accepted.  - The file name must include the name of the nominated high-level category/ies and the Applicant’s name.  **Note:**  Referee reports can be from non Government clients and not required to be signed. |

##### Referee Report

**This referee report must not be used for any other purpose other than in relation to the NSW Government ICT Services Scheme.**

**This referee report is for: (*indicate below the NOMINATED ICT SERVICE CATEGORY/IES applicable to this report)***

**A: Architecture & Design**

**B: Benchmarking**

**C: Data Centre**

**D: End User Computing**

**E: Strategy**

**F: Network Management**

**G: Other ICT Services**

**H: Risk Management**

**I: ICT Programs**

**J: Server Management**

**K: Security Management**

**L: Learning Services**

**M: Systems & Solutions**

**N: Software Licenses**

**O: Telecommunication Services**

**P: Telecommunications Equipment**

**Q: ERP and related corporate & shared services**

**R: ICT Cloud Services**

For detailed descriptions of ICT Service categories, Refer to Range of products and services section on the ICT Services page on [buy.nsw.gov.au](https://buy.nsw.gov.au/schemes/ict-services-scheme).

**NSW Government ICT Services Scheme**

The information provided in this report may be subject to investigation, enquiries, clarification and verification by NSW Government Agencies to assist in assessing the suitability of service providers for the NSW Government ICT Services Scheme.

Referees may be from any organisation and not just Government Departments.

**REFEREE’S DETAILS**

|  |  |
| --- | --- |
| Referee’s Name and ABN |  |
| Referee’s line of business, e.g. Government, Not for Profit, Private Enterprise |  |
| If the referee is a private enterprise, state whether it is a sole trader, local company, Australia-wide company, or international company. |  |
| Number of employees in Referee’s organisation |  |

**ENGAGEMENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Vendor’s Organisation Name: |  | | |
| Vendor’s Contact Person: |  | Phone: |  |
| Engagement / Project Name: |  | | |
| Description of deliverables: |  | | |
| Date Engagement Completed or goods delivered: |  | | |
| Total Fee (including GST): | **$** | | |

**ASSESSMENT**

| **As the client who paid for these deliverables, how well did the VENDOR meet your expectations?** | | **N/A** | **Unsatisfactory** | **Marginal** | **Acceptable** | **Good** | **Superior** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Capacity**  Eg, ability to service a large organisation such as a Government Department |  |  |  |  |  |  |
|  | **Time Management**  e.g. meeting milestones, on time delivery |  |  |  |  |  |  |
|  | **Management & suitability of personnel (if applicable)**  e.g. skills, experience, sufficient number, appropriate seniority used |  |  |  |  |  |  |
|  | **Standard of Deliverables**  e.g. meeting requirements, specifications |  |  |  |  |  |  |
|  | **Quality of Deliverables** |  |  |  |  |  |  |
|  | **Cost (only required for professional services)**  actual cost did not exceed cost estimate without prior agreement |  |  |  |  |  |  |
|  | **Communications**  appropriate level of reporting |  |  |  |  |  |  |
|  | **Cooperative Relationships**  e.g. Cooperative approach, commitment, resolving issues |  |  |  |  |  |  |
|  | **Recommendation for Future Work**  Would you recommend the Service Provider for similar type of work? | **Yes / No** | | | | | |

**Additional Comments on the Service Provider’s performance**

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| --- |
| *< comments may be extended as required>* |

**Provide details of Client referee e.g. General Manager, Director, Senior Project Manager**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Signature (optional): |  |
| Title: |  | | |
| Date: |  | | |
| Tel No: |  | Mobile No: |  |
| E-mail: |  | | |