**IMPLEMENTING PARTNER REFERENCES CHECKLIST**

The below information is requested to be include in the response to the CEI issued by IOM:

**TABLE 1 – MAIN IMPLEMENTING PARTNER EXPERIENCE IN LAST THREE YEARS (free format)**

|  |  |
| --- | --- |
| Starting Month/ Year |  |
| Ending Month / Year |  |
| Donor / Lead partner |  |
| Description of projects |  |
| Contract Amount |  |
| Related Cluster (s) |  |

Remarks (Provide documentary evidence)

**TABLE 2 – SIMILAR EXPERIENCE IN LAST THREE YEARS (free format)**

|  |  |
| --- | --- |
| Year |  |
| Donor / Lead partner |  |
| Description of projects |  |
| Contract Amount |  |
| Related Cluster (s) |  |

Remarks (Provide documentary evidence (\*))

**TABLE 3 – LIST OF KEY STAFF MEMBERS (free format)**

|  |  |
| --- | --- |
| Name |  |
| Designation Qualification |  |
| No. of Years of Experience |  |

Provide an organizational chart and detailed CVs for key management and personnel in the Organization. Arrange in tabular for the information required (as per the table above) for each staff member.

**TABLE 4 – ANY OTHER INFORMATION (free format)**

In addition to the required information, Implementing Partners may provide any other related documents