

**CALL FOR EXPRESSION OF INTEREST (EOI)
FOR THE REQUEST FOR PROPOSAL (RFP) N° PTD/10/053**

**MAPS and DMAPS Services Oriented Architecture (SOA) deployment
MAPS Modernization Project – Phase II**

ANNEX I – PREQUALIFICATION QUESTIONNAIRE

Please PRINT clearly. Unless otherwise instructed, you may adapt the space given for your responses or attach supporting documentation, as may be appropriate.

1. COMPANY DETAILS

Name of Company:

Address:

Postal code:City:

Country:

Telephone:

Facsimile:

E-mail:

Website:

Number of employees:

Starting date of business:

Contact name and Title:

Contact name e-mail:

Contact name telephone:

Please include or attach any other information (including, but not limited to: size of the company, financial statements, location(s), recruitment policy, etc..) concerning your company that you consider to be important for carrying out WIPO's project requirements.

REFERENCE 2

CLIENT NAME :

CLIENT ADDRESS :

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CLIENT SECTOR OF ACTIVITY :

SHORT PROJECT DESCRIPTION :

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RELEVANT TECHNOLOGY :

INITIAL ESTIMATE (in man years) :

ACTUAL CONSUMPTION (in man years) :

CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

REFERENCE 3

CLIENT NAME :

CLIENT ADDRESS :

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CLIENT SECTOR OF ACTIVITY :

SHORT PROJECT DESCRIPTION :

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RELEVANT TECHNOLOGY :

INITIAL ESTIMATE (in man years) :

ACTUAL CONSUMPTION (in man years) :

CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

4. REFERENCES OF SOA PROJECTS

SOA projects require specific skill sets. Suppliers will be requested to prove that they possess the necessary project management, business analysis and technical abilities, by providing the proof that they have successfully delivered several large scale SOA solutions.

REFERENCE 3

CLIENT NAME :

CLIENT ADDRESS :

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CLIENT SECTOR OF ACTIVITY :

SHORT PROJECT DESCRIPTION :

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RELEVANT TECHNOLOGY :

MAIN SUPPORTED BUSINESS MAP (DIAGRAM):

NUMBER OF WORKFLOWS INVOLVED:

NUMBER OF SERVICES:

GOVERNANCE IMPLEMENTED (TOOLS AND PROCEDURES):

CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

5. REFERENCES OF PROJECTS WITH NATIONAL OR INTERNATIONAL ADMINISTRATIONS

Dual (Client / Supplier) management and delivery of a project requires some mutual understanding and compatibility of both enterprise cultures. Therefore WIPO expects bidders to show a successful track record of delivering projects in the public sector.

Please provide at least 3 references for successful delivery of projects within a national or international administration. Each reference should indicate: client name and address, client activity, project size (man years), two (2) contacts with telephone numbers and email.

REFERENCE 1

CLIENT NAME :

CLIENT ADDRESS :

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CLIENT SECTOR OF ACTIVITY :

PROJECT SIZE (in man years) :

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CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

REFERENCE 2

CLIENT NAME :

CLIENT ADDRESS :

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CLIENT SECTOR OF ACTIVITY :

PROJECT SIZE (in man years) :

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CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

REFERENCE 3

CLIENT NAME :

CLIENT ADDRESS :

.....

CLIENT SECTOR OF ACTIVITY :

PROJECT SIZE (in man years) :

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CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

6. PROVEN OFF-SHORE CAPABILITY

The Sogeti Report as well as subsequent analysis show that to be delivered with budget the modernization will have to rely on off-shore expertise. WIPO requires therefore a genuine track record in delivering projects relying on a mix of in-shore and off-shore resources.

Provide at least 3 references of successful delivery with combined in-shore and off-shore resources. Each reference should indicate: client name and address, client sector of activity, partner name and address, short project description, role of in-shore resources, in-shore effort (man years), role of off-shore resources, off-shore effort (man years), two (2) client contacts with telephone numbers and email, and two (2) partner contacts with telephone numbers and email.

REFERENCE 1

CLIENT NAME :

CLIENT ADDRESS :

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PARTNER NAME AND ADDRESS :

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SHORT PROJECT DESCRIPTION :

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ROLE OF IN-SHORE RESOURCES :

IN-SHORE EFFORT (in man years):

NUMBER OF WORKFLOWS INVOLVED:

ROLE OF OFF-SHORE RESOURCES:

OFF-SHORE EFFORT (in man years):

CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :

CONTACT 2 E-MAIL AND TELEPHONE :

PARTNER 1 NAME :

PARTNER 1 E-MAIL AND TELEPHONE :

PARTNER 1 NAME :

PARTNER 1 E-MAIL AND TELEPHONE :

REFERENCE 2

CLIENT NAME :

CLIENT ADDRESS :

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PARTNER NAME AND ADDRESS :

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SHORT PROJECT DESCRIPTION :

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ROLE OF IN-SHORE RESOURCES :

IN-SHORE EFFORT (in man years):

NUMBER OF WORKFLOWS INVOLVED:

ROLE OF OFF-SHORE RESOURCES:

OFF-SHORE EFFORT (in man years):

CONTACT 1 NAME :

CONTACT 1 E-MAIL AND TELEPHONE :

CONTACT 2 NAME :
 CONTACT 2 E-MAIL AND TELEPHONE :
 PARTNER 1 NAME :
 PARTNER 1 E-MAIL AND TELEPHONE :
 PARTNER 1 NAME :
 PARTNER 1 E-MAIL AND TELEPHONE :

REFERENCE 3

CLIENT NAME :
 CLIENT ADDRESS :

 PARTNER NAME AND ADDRESS :

 SHORT PROJECT DESCRIPTION :

 ROLE OF IN-SHORE RESOURCES :
 IN-SHORE EFFORT (in man years):
 NUMBER OF WORKFLOWS INVOLVED:
 ROLE OF OFF-SHORE RESOURCES:
 OFF-SHORE EFFORT (in man years):
 CONTACT 1 NAME :
 CONTACT 1 E-MAIL AND TELEPHONE :
 CONTACT 2 NAME :
 CONTACT 2 E-MAIL AND TELEPHONE :
 PARTNER 1 NAME :
 PARTNER 1 E-MAIL AND TELEPHONE :
 PARTNER 1 NAME :
 PARTNER 1 E-MAIL AND TELEPHONE :

I certify the accuracy of the above-mentioned information. I recognize the right reserved by WIPO to verify with the listed firms/organizations the accuracy of any information submitted in response to the above-mentioned questionnaire or otherwise submitted to WIPO. I further authorize WIPO to disqualify the firm I represent from the competition in the event that any of the above information is found to be false, erroneous or ambiguous.

Place: Date:

Name and title of the authorized
 Representative:

Signature: