



Miami-Dade County Public Schools
 Heating, Ventilation and Air Conditioning (HVAC)
 Test & Balance (T&B) Services

PROPOSED STAFF FORM

(Make copies of this form and use for factors 4A-4 - Submit one form for each employee)

M-DCPS CONTRACT TITLE: Heating, Ventilation and Air Conditioning (HVAC), Test & Balance (T&B) Services		TERM CONTRACT #:
PROPOSER NAME:		Proposal Date:
EMPLOYEE NAME:	TITLE:	CHECK ONLY ONE: <input type="checkbox"/> 4A Registered Professionals <input type="checkbox"/> 4B Licensed Contractor
% of time to be assigned to the proposed contract:	Years with firm:	Years with other firms:
PROJECT TYPE	<u>Project Type:</u> A. Florida Public Educational System, B. Governmental Agency, C. Private Sector, D. Term Contracts	
	PROJECT TITLE (list up to 5 related projects)	EMPLOYEE'S INVOLVEMENT
EDUCATION: <i>(highest level achieved, degree earned, school & year)</i>		
REGISTRATION(S) & LICENSE(S):		
OTHER QUALIFICATIONS:		
EMPLOYEE'S ABILITIES <i>(check all that apply):</i>	<input type="checkbox"/> Pre-construction Services <input type="checkbox"/> Periodic Field Inspections <input type="checkbox"/> Air Distribution T&B or Re-Balance <input type="checkbox"/> Hydronic System T&B or Re-Balance	<input type="checkbox"/> HVAC/Syst. Commissioning <input type="checkbox"/> Major Component Performance Analysis <input type="checkbox"/> Trouble Shooting <input type="checkbox"/> Corrective Action Reports <input type="checkbox"/> Other: _____ _____ _____