

### Team Experience

Proposed Staff (Please designate SUB Consultant Firms where applicable)						
#	1	2	3	4	5	6
<b>Name</b>						
<b>Project Position</b>						
<b>DSA Experience (Yes/No)</b>						
<b>State Funding Experience (Yes/No)</b>						
<b>K14 Experience (Yes, No)</b>						
<b>Public Agency Experience (Yes, No)</b>						
<b>License Number</b>						
<b>Number of Projects Concurrently Inspecting</b>						
<b>Hourly Rate</b>						
<b>Project Hours</b>						
Past Project Experience						
#	1	2	3	4	5	6
<b>Owner/Client Name</b>						
<b>Project Name</b>						
<b>Sub Consultants Utilized</b>						
<b>Start/Finish Dates</b>						
<b>Brief Description (Bldg Type, Sqft, S/U, etc)</b>						
<b>Position Held During this Project</b>						
<b>New Construction or Modernization (New/Mod)</b>						
<b>Awarded Company Contract Value</b>						
<b>Amendment</b>						
<b>Amendments Value</b>						
<b>Final Company Contract Value</b>						
<b>Original Project Construction Value</b>						
<b>Total Change Orders \$</b>						
<b>% Change Order</b>						
<b>Final Project Construction Value</b>						
<b>Reasons for Change Orders: Unforeseen, Owner Requests, State Agency Request, Errors &amp; Omissions (Provide % of Each)</b>						
<b>DSA Closeout Status and date of</b>						

**Owner/Client Reference (please provide three references per position proposed)**

Description	1	2	3	4	5	6
<b>Reference 1 Name</b>						
Employer Name						
Phone Number						
Email						
Project Name						
<b>Reference 2 Name</b>						
Employer Name						
Phone Number						
Email						
Project Name						
<b>Reference 3 Name</b>						
Position						
Phone Number						
Email						
Project Name						