

## CLIENT REFERENCE FORM SAMPLES

### Note to agencies:

**These forms are examples. Choose the form that works the best for your application and tailor it to fit your needs.**

### **Sample A**

- A complete and separate Client Reference Form must be provided for each reference.
- Offeror must complete the first part of the Client Reference Form, filling in the information for Company (Offeror) Name, Company (Offeror) Address, and the Name of Project.
- A responsible party of the organization for which the services were provided (the Customer) must provide the reference information.
- The person providing the reference must sign and date the form.
- The Client Reference Form(s) must be submitted with the Offeror's proposal.
- The State may contact the reference to verify the information given within the Client Reference Form and within the proposal. If the State finds erroneous information, points may be deducted, or the proposal may be rejected.
- If all questions are not answered on the Client Reference Form, if information is missing, or if the form is not signed, points may be deducted, or the proposal may be rejected.
- If a proposal is submitted without a Client Reference Form, points may be deducted, or the proposal may be rejected.
- The State reserves the right to use other known references for the project other than those provided by the Offeror.

## Client Reference Form

### *Offeror Information*

Company Name (Offeror):	Name of Project:
Company (Offeror) Address:	

### *Client Information*

Organization Name (Client):	Organization Address:
Person Providing the Reference:	Title:
Phone Number:	Email address:
<b>Reference <u>Signature</u> &amp; Date:</b>	

The person providing the reference, as identified above, must provide the following information. This person must be a responsible party of the organization for which the work was performed. This person should have comprehensive knowledge about the project and the company's (Offeror) role and responsibilities within the project.

**Your response will be used as part of the Offeror's response. A maximum of (insert number) of points are available based on your ratings.**

- Briefly describe the services provided by the company identified above.**
- Rate each of the following concerning this company's performance using the ratings from 0-4 below:**
  - 4 – Strongly Agree/Very Positive
  - 3 – Agree/Positive
  - 2 – Neutral
  - 1 – Disagree/ Negative
  - 0 – Failed

### Rating

- \_\_\_\_\_ A. This company ensured the project deliverables were completed on time and within the agreed budget.
- \_\_\_\_\_ B. This company provided the appropriate resources to the project.
- \_\_\_\_\_ C. This company was knowledgeable in providing the services.
- \_\_\_\_\_ D. The business relationship with this company was positive and cooperative, versus negative and adversarial.
- \_\_\_\_\_ E. This company provided open, timely communications, and was responsive to our needs and requirements.
- \_\_\_\_\_ F. I would choose to work with this company again.

## Sample B

The individual completing this Client Reference Form must be a responsible party of the organization for which the services were provided. This individual should have comprehensive knowledge about the services provided.

Your response will be used as part of the Offeror's response. A maximum of **(insert number)** of points are available based on your ratings.

<p style="text-align: center;"><b>Client Reference Form</b></p> <p>Company Name (Offeror): _____</p> <p>Client: _____</p> <p>Description of services/products provided:</p> <th data-bbox="1252 373 1502 804"><p style="text-align: center;"><b>0-4</b></p><p>Please rank each of these items on a scale of 0 to 4, where:</p><div style="border: 1px solid black; padding: 5px;"><p><b>4:</b> Agree Strongly</p><p><b>3:</b> Agree</p><p><b>2:</b> Neutral</p><p><b>1:</b> Disagree</p><p><b>0:</b> Failed</p></div></th>	<p style="text-align: center;"><b>0-4</b></p> <p>Please rank each of these items on a scale of 0 to 4, where:</p> <div style="border: 1px solid black; padding: 5px;"><p><b>4:</b> Agree Strongly</p><p><b>3:</b> Agree</p><p><b>2:</b> Neutral</p><p><b>1:</b> Disagree</p><p><b>0:</b> Failed</p></div>
1. Overall, you are very satisfied with the Offeror's products and services.	
2. Overall, you are very satisfied with the Offeror's staff.	
3. Overall, the Offeror's technical support unit is knowledgeable, competent, and responsive.	
4. Overall, you are very satisfied with the Offeror's on-site training regarding operation of the installed system.	
5. The Offeror communicated issues and trouble areas early and managed them well.	
6. The Offeror implemented their system in an effective and timely manner.	
7. The Offeror implemented their system on schedule, and in accordance with the contract.	
8. The Offeror implemented their system within budget and in accordance with the contract.	
<p><b>NAME:</b> _____ <b>DATE:</b> _____</p> <p style="text-align: center;">(Signature)</p> <p><b>TITLE:</b> _____</p> <p><b>EMAIL ADDRESS:</b> _____</p> <p><b>PHONE NUMBER:</b> _____</p>	

Sample C

**CLIENT REFERENCE QUESTIONNAIRE**

for RFP # **(insert number) (insert title)**

**This standard reference questionnaire must be completed by all individuals providing a reference for the Offeror.**

The Offeror is solely responsible for obtaining completed reference questionnaires as required and for including the completed reference forms with their response.

**REFERENCE SUBJECT:**

**OFFEROR'S NAME: (completed by Offeror before reference is requested)**

The Offeror specified above intends to submit a proposal to the State of Montana in response to RFP # **(insert number) (insert title)**. As a part of this proposal, the Offeror must include a number of completed reference questionnaires (using this form). Each individual responding to this reference questionnaire is asked to follow these instructions:

- Complete this questionnaire (either using the form provided or an exact duplicate of this document);
- Sign and date the completed questionnaire;
- Return the completed questionnaire directly to the Offeror.

**Please note: Reference Questionnaires must be included with the Offeror's response and received by the due date listed in the solicitation.**

**Your response will be used as part of the Offeror's response. A maximum of (insert number) of points are available based on your ratings.**

Please provide the following information about the individual completing this reference questionnaire on behalf of the above-named Offeror.

<i>Client Information</i>	
Organization Name (Client):	Organization Address:
Person Providing the Reference:	Title:
Phone Number:	Email Address:
Reference Signature and Date:	
_____	_____
Signature	Date

1. Briefly describe the services provided by the Offeror identified above.
  
  
  
  
  
  
  
  
  
  
2. How long have you been using the services from the Offeror named above?
  
  
  
  
  
  
  
  
  
  
3. Please briefly describe your role with the services.
  
  
  
  
  
  
  
  
  
  
4. Rate each of the following concerning this Offeror's performance using the ratings from 0-4 below:

- 4 – Strongly Agree/Very Positive
- 3 – Agree/Positive
- 2 – Neutral
- 1 – Disagree/Negative
- 0 – Strongly Disagree/Very Negative

Rating

- \_\_\_\_\_ The system is easy to use.
- \_\_\_\_\_ If ad hoc reporting is provided, it works well.
- \_\_\_\_\_ The system is fairly responsive without long wait times.
- \_\_\_\_\_ The data entry and/or data import error checking is complete and easy to use.
- \_\_\_\_\_ The Offeror is responsive to problems.
- \_\_\_\_\_ There are no lingering bugs that the Offeror has been unable to fix.
- \_\_\_\_\_ The Offeror's personnel are knowledgeable about the requirements of the system.
- \_\_\_\_\_ How would you rate your overall satisfaction with the application?

5. Please provide additional comments if desired.