

Annexure 2: Reference Letter

PART A – To be completed by respondent for RFP submission

Company name of Respondent:		
Details of client for reference purposes:	Name:	
	Company name:	
	Contact details:	

PART B – To be completed by reference and returned to ELIDZ evaluation team

If the Service Provider has not done any of the tasks below for the Referee, please place Not Applicable (N/A). This Reference is required in relation to Voice Services provided by your current Service Provider.

Please indicate and rate whether the respondent has performed the attributes/tasks listed below.	Has the service been rendered (Yes / No)	Poor	Average	Good
		1	2	3
Did the service provider implement their last project successfully?				
Was the solution delivered in the required time frame?				
Was conformance to a project management standard adhered to?				
Was the skill competency of the team relevant and adequate to deliver on the solution?				
Were all meeting's schedules adhered to?				
Were you satisfied with the technical support provided during the project?				
Did the service provider provide you with voice services for a period of 5 years or longer?				

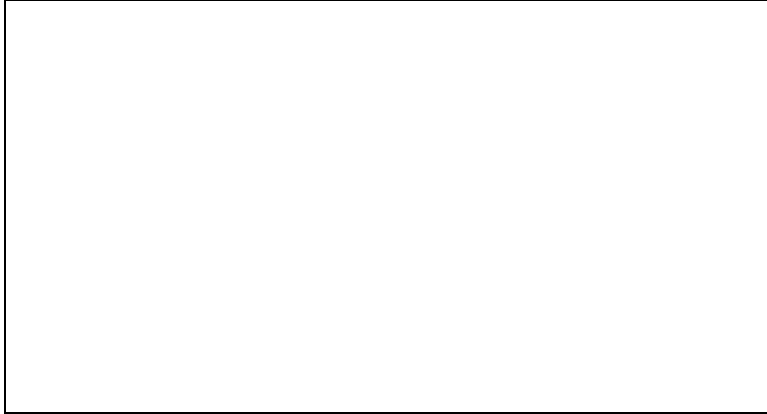
*** The ELIDZ reserves the right to verify references”**

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Referee name: _____ Referee signature: _____

Date: _____

Company Stamp

A large empty rectangular box with a black border, intended for a company stamp or seal.