Prepare this form for each key staff individual, including subcontractor-provided key staff, if any, of the Offeror’s proposed Account Team (IFB Section 3.2 (H)). Where individuals are not named, include qualifications of the individuals that will fill the positions. If additional space is needed, you may add additional sheets.

**Offeror Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Individual’s Name:**

**Job Title:**

**Relationship to Project:**

 **\_\_\_\_\_**

**EDUCATION**

Institution Year

& Location Degree Conferred Discipline

**PROFESSIONAL EMPLOYMENT** (Start with most recent.)

Dates

From - To Employer Title

**PROFESSIONAL EXPERIENCE** (Significant experience/education relevant to program)