

APPENDIX F – FORM 1

HBITS Form 1:
Task Order Request Form

A maximum of five (5) candidates may be requested if all positions are for the same service group, job title, skill level/demand and position qualifications. OGS intends to develop a web-based version of this form which will be available through a portal. Accordingly, this form may change based on final development needs and identified fields below may be adjusted based on the authorized user and may not be applicable to all requests.

Request Date:	
Agency:	
Agency Contact Name:	
Agency Contact E-mail:	
Agency Contact Phone #:	

Has Agency received the necessary internal agency (management) approvals to support this Task Order Request?	
Has Agency received PTP approval from OITS to support this Task Order Request (if applicable)?	
Has Agency received DOB approval to support this Task Order request (if applicable)?	
Will Federal Funding be used to pay (in part or in full) for this position(s) (if applicable)?	
Is this a request for the NYS Department of Labor? See Section 5.23 of the Contract for additional details.	

Is this a Project or Program specific request (e.g., Connections, SFS)?	
If yes, please list the Project or Program Name:	
Please provide a short description of the project:	
Please provide a full listing of the day to day tasks to be performed by the Consultant (be descriptive and specific):	

Is this a New or Incumbent request?	
Which Service Group is required?	
What is the number of staff being requested? (maximum of 5)	
Which Job Title Category is required?	
Which Skill Level is required?	
Which Skill Demand is required?	
How many Candidate Response Forms are being requested per Contractor per position? (1 or 2)	

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When is the Target Start Date? (30 Business Days minimum from date of request)	
How long is the engagement? (in months)	
When is the estimated completion date?	
Is this a Full or Part-Time Position (Full time is considered 40 Hours Per Week)?	
If Part-Time, enter approximate number of hours per week:	
What are the daily work hours? (note if negotiable or list preferred start and end time):	
Where is the Home Base Region ?	
Where is the work office located? Enter Building Name (if known) Full Street Address, City, and ZIP	
What type of software is typically used by the Agency? (e.g., Agency is an "IBM shop.")	
What type of hardware is typically used by the Agency? (e.g., Agency is a "Unisys shop.")	

Position Mandatory Qualifications			
(Insert Text From Contract for Position Title and Skill Level)			Pass/Fail
<u>"Mandatory" Qualifications cannot be changed nor can additional "mandatory" qualifications be added</u>			<i>The number of qualifications requested, and the number of points assigned must total 80 points.</i>
Qualification Number	Requested Qualifications	Points Assigned for Meeting Qualifications (Always 75% of Max Points)	Maximum Points Allowed for Exceeding Qualifications (80)
1.	Sample: X Months of Experience in Y doing Z	7.5	10
2.	Sample: X Months of Experience in Y doing Z	7.5	10
3.	Sample: X Months of Experience in Y doing Z	7.5	10
4.	Sample: X Months of Experience in Y doing Z	7.5	10
5.	Sample: X Months of Experience in Y doing Z	7.5	10
6.	Sample: X Months of Experience in Y doing Z	7.5	10
7.	Sample: X Months of Experience in Y doing Z	3.75	5
8.	Sample: X Months of Experience in Y doing Z	3.75	5
9.	Sample: Bachelor's Degree	3.75	5
10.	Sample: Project Management Professional Certification	3.75	5
Requested Qualifications Must Always Total 80 Points For Maximum Score		60	80
Interview Must Always Total		20	
Total Score		100	

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Additional Information Requests:	
Are there additional security requirements for the Authorized User?	
Will additional training possibly be required during the Engagement?	
If Yes, provide description of anticipated training.	
What type, or manner, of Knowledge Transfer is requested during the engagement?	
Is travel anticipated during the Engagement?	
If Yes, please list anticipated frequency and locations for travel:	