PROFILE OF EVALUATOR OF CENTRAL PROCUREMENT BOARD

| | REMAIN AS AN | EVAL | UATOR? | YES | NO | | | |
|----------|---|---------------------|---|---|-----------------|-------------|--|--|
| | (Please tick according is to be filled only if the | | | rm | | | | |
| 1. | Surname: | | | | | | | |
| | Other Names: | | • | | | | | |
| | Maiden Name (if a | | | | | | | |
| | Title: Mr/Mrs/Miss (Tick as appropriate) | | | | | | | |
| 2. | Nationality: | | | | | | | |
| 3. | Date of Birth: | Date of Birth: Age: | | | | | | |
| 4. | National Identity C | ard No | | | (Attach | copy of ID) | | |
| 5. | Residential Address: | | | | | | | |
| 6. | Tel. No. (Home/Office/Close relative): | | | | | | | |
| | Mobile No.: | | | | | | | |
| | Mobile No.: E-mail address: | | | | | | | |
| 7. | Qualifications: | | | | | | | |
| Cam | bridge School Certifi | cate Nov/D | ec | Cambridge/Londo | n GCE 'O' Level | Jan/June | | |
| | Year: | 0 | | Year: | Index No. | | | |
| | Subjects | | Grade/Level | Subjects | | Grade/Level | | |
| 1. | | | | | | | | |
| 2. 3. | | | | | | | | |
| 4. | | | | | | | | |
| 5. | | | | | | | | |
| 6. | | | | | | | | |
| 7. | | | | | | | | |
| 8. | | | | | | | | |
| | | | | | | | | |
| Caml | ambridge Higher School Certificate Nov/Dec | | | Cambridge/London GCE 'A' Level Jan/June | | | | |
| | Year: | Index No | | Year: | Index No. | Credo/Lovel | | |
| | Subjects | | Grade/Level | Subjects | | Grade/Level | | |

| | Year: | Index No. | |
|----|------------------|-------------|--|
| | Subjects | Grade/Level | |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| | Subsidiary Level | | |
| 1. | | | |
| 2. | | | |
| | General Paper | | |

| Year: | Index No. | | |
|----------|-----------|-------------|--|
| Subjects | | Grade/Level | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| (in c | lifications case of degree whether s/Special, Ordinary/General) | Date obtained | Examining Institution | | | |
|-------|--|------------------------------|-------------------------|--|--|--|
| | | | | | | |
| | | | | | | |
| 9. | Other Specific Qualifications/ Expertise (Attach documentary evidence if applicable) | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 10. | Work Experience | | | | | |
| | Institutions | Position held | Period | | | |
| | | | | | | |
| •••• | | | | | | |
| •••• | | | | | | |
| •••• | | | | | | |
| | | | | | | |
| 11. | I certify that the particulars gi | ven above are correct to the | e best of my knowledge. | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| •••• | Date | Signature of Evaluator | | | | |

Other qualifications (Academic, Technical, Professional)

8.