

Insert Company or Entity Letterhead

People Panel – Labour Hire Services for the Australian Government

Referee Report

Referee's Details

Your Name:	
Your Position or Level: <i>Note: Preferably EL1 or above for Commonwealth Public Service or Middle Management and above for all other Referees</i>	
Your Department / Agency / Organisation:	
Your Phone Number:	
Your Email Address:	

Referee's Relationship with the Tendering Organisation

Please provide the name of the Tendering Organisation that provided the services to your Department / Agency /					
Do you have any actual or potential conflicts of interest related to the Tendering Organisation you are providing this Referee Report for? <i>(Please select one)</i>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>Yes</td> </tr> <tr> <td><input type="checkbox"/></td> <td>No</td> </tr> </table>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes				
<input type="checkbox"/>	No				
If 'Yes', provide details:					

What are the approximate dates that the Tendering Organisation provided these services?	
How long have you been doing business with the Tendering Organisation? <i>(Please select one)</i>	<input type="checkbox"/> 0 – 6 months <input type="checkbox"/> 6 – 12 months <input type="checkbox"/> 1 – 3 years <input type="checkbox"/> 3 – 5 years <input type="checkbox"/> 5 – 10 years <input type="checkbox"/> Over 10 years

Details of Services Delivered

What equivalent level of Labour Hire was the activity for? <i>(Select all that apply)</i>	<input type="checkbox"/> APS1/ Entry Level <input type="checkbox"/> APS2/ Entry Level <input type="checkbox"/> APS3/Entry Level <input type="checkbox"/> APS4/Junior <input type="checkbox"/> APS5/Junior <input type="checkbox"/> APS6/Experienced/Supervisor <input type="checkbox"/> EL1/Junior Manager <input type="checkbox"/> EL2/Middle Manager <input type="checkbox"/> SES/Senior Manager <input type="checkbox"/> C Suite
What was the approximate value of the engagement (GST inclusive)?	
Based on your experience, does the Tendering Organisation: <i>(Select all that apply)</i>	<input type="checkbox"/> Deliver the services on time <input type="checkbox"/> Deliver the services on budget <input type="checkbox"/> Manage the relationship with your organisation effectively and efficiently <input type="checkbox"/> Have the suitable skills and experience to deliver the services <input type="checkbox"/> Deliver high quality outcomes from their work for your organisation <input type="checkbox"/> Experience any capacity issues or constraints <input type="checkbox"/> Appropriately and proactively manage issues that arise <input type="checkbox"/> Operate in a transparent and accountable manner <input type="checkbox"/> Respond in a timely manner to reasonable requests
Were you satisfied with the services provided by the Tendering Organisation? <i>(Please select one)</i>	<input type="checkbox"/> Very Satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Somewhat Satisfied <input type="checkbox"/> Not Satisfied
Would you engage the Tendering Organisation to deliver services to your Department / Agency / Organisation again?	

<i>Signature</i>	<i>Date</i>

Note: Electronic signatures are acceptable