**SE-817**

**GEWWC SERVICES SELECTION COMMITTEE SUMMARY - RFP**

**AGENCY:**

**PROJECT NAME:**

**PROJECT NUMBER:**

|  |  |
| --- | --- |
| **COMMITTEE MEMBERS***(Insert Names of Voting Members)* | **RANKING OF FIRMS** |
| **A** | **B** | **C** | **D** | **E** |
| **1.** |       |       |       |       |       |       |
| **2.** |       |       |       |       |       |       |
| **3.** |       |       |       |       |       |       |
| **4.** |       |       |       |       |       |       |
| **5.** |       |       |       |       |       |       |
| **6.** |       |       |       |       |       |       |
| **7.** |       |       |       |       |       |       |
| **8.** |       |       |       |       |       |       |
| **TOTAL** (Resolve a tie by ranking the resident firm higher than the non-resident. If both are residents, or non-residents, resolve the tie by Committee consensus) |       |       |       |       |       |
| **RANKING BY COMMITTEE *(1,2,3)*** |       |       |       |       |       |

|  |
| --- |
| **FIRMS SUBMITTING PROPOSAL** |
| **A.**       | **D.**       |
| **B.**       | **E.**       |
| **C.**       |  |

|  |
| --- |
| **SELECTION COMMITTEE CHAIR CERTIFICATION:**The Agency Selection Committee has reviewed the submittals of the prequalified firms in response to the *Request for Proposals* and ranked all firms in accordance with the criteria set forth in the *Request for Proposals*. |
| **COMMITTEE CHAIR NAME:**       | **DATE:**       |
| **COMMITTEE CHAIR TITLE:**       |
| **COMMITTEE CHAIR SIGNATURE:** |