# **5A – MINIMUM QUALIFICATIONS SUMMARY**

CATS+ TORFP # R00B7400065

All content on this form <u>must also</u> be on the Personnel Resume Form.

ONLY include information on this summary that supports meeting a minimum qualification.

Proposed Individual's Name and Company/Sub-Contractor:	List how the proposed individual meets each requirement by including a reference to relevant entries in Form 5B		
LABOR CATEGORY TITLE – Engineer, Information Security			
Education:  A Bachelor's Degree from an accredited college or university with a major in Computer Science, Information Systems, Engineering, Business, or other related scientific or technical discipline. A Master's Degree is preferred.	(Identify school or institution Name; Address; Degree obtained and dates attended.)		
Generalized Experience:  This position requires a minimum of eight (8) years of experience in information protection.	(Identify specific work experiences from the resume that illustrate compliance with the Master Contract RFP Labor Category requirements for Generalized Experience.)  FROM TO Job Title and Company		
Provide dates in the format of MM/YY to MM/YY	Match to Form   <insert 5b="" 5b:="" cross-reference(s)="" description="" form="" full="" on="" the="" to=""  =""></insert>		
Specialized Experience: At least five (5) years of experience in defining security programs or processes for the protection of sensitive or classified information.  Provide dates in the format of MM/YY to MM/YY	(Identify specific work experiences from the resume that illustrate compliance with the Master Contract RFP Labor Category requirements for Specialized Experience.)  FROM TO Job Title and Company  Match to Form <insert 5b="" cross-reference="" description="" form="" full="" on="" the="" to=""></insert>		
TORFP Additional Requirements:  1. Experience reviewing security and privacy policy documents and making formal recommendations to improve security policy and practices			

PK-12 STATE LONGITUDINAL DATA SYSTEM (SL.	DS) NUMBER R00B7400065
SECURITY POLICIES IMPROVEMENT	
Prior demonstrated creation of a security and privacy policy issued recently (within the last five (5) years).  Provide dates in the format of MM/YY to MM/YY	
The information provided on this form for the knowledge (Signatures must be included):	his labor class is true and correct to the best of my
<b>Master Contractor Representative:</b>	
Signature	Date
Proposed Individual:	
Signature	Date

#### 5B – PERSONNEL RESUME FORM

CATS+ TORFP # R00B7400065

Instructions: Submit one resume form for each resource proposed. Do not submit other resume formats. Fill out each box as instructed. Failure to follow the instructions on the instructions page and in TORFP may result in the TO Proposal being considered not susceptible for award.

Resource Name:	
Master Contractor:	<pre><insert contractor="" master="" name=""> Sub-Contractor (if applicable):</insert></pre>
Proposed CATS+ Labor Category:	<to be="" by="" contractor="" master="" proposed="" the=""></to>
Job Title (As listed in TORFP):	Engineer, Information Security

# **Education / Training (start with most recent degree / certificate)**

Institution Name / City / State	Degree / Certification	Year Completed	Field Of Study
<add as="" lines="" needed=""></add>			

## **Relevant Work Experience\***

Describe work experience relevant to the Duties / Responsibilities and Minimum Qualifications described in Section 3 of the TORFP. Start with the most recent experience first; do not include experience not relevant to the scope of this TORFP; use Employment History below for full employment history. Enter dates as MM/YY – MM/YY. Add lines as needed.

[Organization]	Description of Work (recommended: organize work descriptions to address
[Title / Role]	minimum qualifications and other requirements)
[Period of Employment / Work	
(MM/YY - MM/YY)]	
[Location]	
[Contact Person (Optional if	
current employer)]	
[Technologies Used]	
[Organization]	Description of Work (recommended: organize work descriptions to address
[Title / Role]	minimum qualifications and other requirements)
[Period of Employment / Work	
MM/YY - MM/YY	
[Location]	
[Contact Person]	
[Technologies Used]	

<sup>\*</sup>Fill out each box. Do not enter "see resume" as a response.

### A) References for Proposed Resource (if requested in the TORFP)

List persons the State may contact as employment references. Add lines as needed.

Reference Number:
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Date From:	<mm yyyy=""></mm>		
Date To:	<mm yyyy=""></mm>		
Organization Name:	<insert organization<="" th=""><th>on name&gt;</th><th></th></insert>	on name>	
Contact Name:	<insert contact=""></insert>		
Contact Phone:	<insert phone=""></insert>		
Contact e-mail:	<insert e-mail=""></insert>		
Details:	<insert details=""></insert>		
The information provid	led on this form for	this labor class is tr	rue and correct to the best of my
knowledge (Signatures			•
Mastan Cantractor De	onmogontativo.		
Master Contractor Re	epresentative.		
			<u> </u>
Signature		Date	
D J. T., J!! J			
Proposed Individual:			
Signature		Date	<del></del>
		Date	
Instruction: Sign each j	Corre	Date	