**ATTACHMENT II**

**Proposed Project Person Skill Summary Sheet**

**This sheet must be completed by each Proposed Project Person.**

**Proposed Project Person Name**

The Proposed Project Person’s expertise, experience, and education will be reviewed and scored based on the information including descriptions provided in this Attachment (which also includes desirable qualifications), and resume.

**Follow the format prescribed below.** The work experiences, skills and abilities listed in each description must be verifiable by proposed personnel references and resumes. A statement such as, *Refer to Resume,* is not acceptable. All fields must be completed.

**MINIMUM TECHNI****CAL QUALIFICATIONS**

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| --- | --- | --- |
| 1. At least five (5) years of experience within the last ten (10) years working as a Business Analyst with large organizations, leading or participating in the technical implementation of ITSM and ITAM solutions such as ServiceNow automating complex business processes, performing all the following activities:    * Creating and maintaining requirement management plan    * Assessment of analysis scope and tasks    * Planning business analysis tasks    * Facilitating joint application design (JAD) and/or collaborative design sessions    * Elicitation, definitions and documentation of various business, user, and system requirements    * Analysis for business process improvement, application design and workflow automation    * Modeling and documenting new functional requirements; use case development.    * Leading and working within cross-functional teams that include business subject matter experts, application architects, developers, and testers.    * Work closely with the ServiceNow implementation vendor team. | **YES/ NO** | **TOTAL NO. OF YEARS** |
| **Do you meet the above minimum qualification?** |  |  |
| Provide a **detailed** description of specific work experience that meets the minimum qualification.  **Description** | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer and Work Location(s)** | **Date Range(s)** | | **No. of Years** |
| **From (MM/YYYY)** | **To (MM/YYYY)** |
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| 1. At least seven (7) years of experience within the last ten (10) years producing business analysis deliverables shown in the following list: (CalSTRS may request deliverable related work samples during Phase 4, Interviews, of the Comparison Process)    * Business requirements, business rules, and business process model    * Use cases, functional requirements and/or functional specifications    * Non-functional requirements    * Stakeholder requests    * Procurement documentation    * Transition plans and/or implementation requirements    * Traceability matrices | | | **YES/ NO** | **TOTAL NO. OF YEARS** |
| **Do you meet the above minimum qualification?** | | |  |  |
| Provide a **detailed** description of specific work experience that meets the minimum qualification.  **Description** | | | | |
| **Employer and Work Location(s)** | **Date Range(s)** | | | **No. of Years** |
| **From (MM/YYYY)** | **To (MM/YYYY)** | |
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| 3. At least three (3) years of experience using Rational Requisite Pro, HP ALM, Jama Software, or other requirement gathering tool to document functional and non- functional requirements, design specifications and provide full traceability for projects. | | | **YES/ NO** | **TOTAL NO. OF YEARS** |
| **Do you meet the above minimum qualification?** | | |  |  |
| Provide a **detailed** description of specific work experience that meets the minimum qualification.  **Description** | | | | |
| **Employer and Work Location(s)** | **Date Range(s)** | | | **No. of Years** |
| **From (MM/YYYY)** | **To (MM/YYYY)** | |
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For each **DESIRABLE QUALIFICATION,** give a brief description of specific work experience that meets/exceeds the criteria and demonstrates the number of **YEARS** entered, as applicable.

**Follow the format prescribed below.** The work experiences, skills and abilities listed in each description must be verifiable by proposed personnel references and resumes. A statement such as, *Refer to Resume,* is not acceptable.

**DESIRABLE QUALIFICATIONS**

|  |  |
| --- | --- |
| 1. Experience as a Business Analyst at with the State or Federal government. | **NO. OF YEARS** |
| **Description** |  |
| 1. Experience as a Business Analyst leading or participating in the technical implementation of ITSM and ITAM solutions, such as ServiceNow, including, but not limited to the following areas of focus:    * Incident Management    * Change Management    * Problem Management    * Configuration Management | **NO. OF YEARS** |

|  |  |
| --- | --- |
| * Hardware Asset Management * Software Asset Management * Cloud SaaS Cost Management * Request Management – Service Catalog * End User Experience * Service Portfolio * Asset Discovery * Service Level Management |  |
| **Description** |  |
| 3. IIBA Certified Business Analysis Professional (CBAP or CCBA). CalSTRS may request a copy of Certification. | **YES/ NO** |
| **Description** |  |
| 4. Experience in Agile methodology or Scaled Agile Framework (SAFe). | **NO. OF YEARS** |
| **Description** |  |
| 5. Experience in the ITIL Framework. | **NO. OF YEARS** |
| **Description** |  |
| 6. Bachelor degree in Computer Science, Computer Engineering, Management Information Systems or related fields from an accredited or government-sanctioned college/university. CalSTRS may request a copy of degree. | **YES/ NO** |
| **Description** |  |

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| 7. The proposed project person will be able to adhere to the hybrid working model by working on- site 2-3 days per week at CalSTRS Headquarters, West Sacramento, CA. If no, provide a short explanation. (No points) | **YES/ NO** |
| **Description** |  |

**ATTACHMENT III**

**Proposed Project Person Business Reference Sheet**

**One sheet must be completed for each Proposed Project Person.**

**Proposed Project Person Name**

**REFERENCE 1**

|  |  |
| --- | --- |
| **Name of Company/Agency** |  |
| **Company Address City, State** |  |
| **Contact Person (Name and Title)** |  |
| **Contact Telephone # (Include area code)** |  |
| **Contact Email Address** |  |
| **Dates of Service (Include years and months)** |  |

**REFERENCE 2**

|  |  |
| --- | --- |
| **Name of Company/Agency** |  |
| **Company Address City, State** |  |
| **Contact Person (Name and Title)** |  |
| **Contact Telephone # (Include area code)** |  |
| **Contact Email Address** |  |
| **Dates of Service (Include years and months)** |  |

**REFERENCE 3**

|  |  |
| --- | --- |
| **Name of Company/Agency** |  |
| **Company Address City, State** |  |
| **Contact Person (Name and Title)** |  |
| **Contact Telephone # (Include area code)** |  |
| **Contact Email Address** |  |
| **Dates of Service (Include years and months)** |  |