

Schedule No. 26.  
Key Personnel

**Executive Manager – Attach CV**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
|  |  |  |  |  |  |

**Summary of Qualifications, Experience and Personnel Occupation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **From** | **To** | **Company** | **Project** | **Position** | **Relevant technical and management experience** |
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**Authorized signature of Company representative and Date**

**Head of Engineering Department - Attach CV**

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| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
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**Summary of Qualifications, Experience and Personnel Occupation**

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| --- | --- | --- | --- | --- | --- |
| **From** | **To** | **Company** | **Project** | **Position** | **Relevant technical and management experience** |
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**Authorized signature of Company representative and Date**

**Tender Officer - Attach CV**

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| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
|  |  |  |  |  |  |

**Summary of Qualifications, Experience and Personnel Occupation**

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| --- | --- | --- | --- | --- | --- |
| **From** | **To** | **Company** | **Project** | **Position** | **Relevant technical and management experience** |
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**Authorized signature of Company representative and Date**

**Personnel experienced in supplying and delivering medicines to health facilities with more than 2 years of professional experience. - Attach CV**

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| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
|  |  |  |  |  |  |

**Summary of Qualifications, Experience and Personnel Occupation**

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| --- | --- | --- | --- | --- | --- |
| **From** | **To** | **Company** | **Project** | **Position** | **Relevant technical and management experience** |
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**Authorized signature of Company representative and Date**

**If other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [include the name of the personnel]**

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| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
|  |  |  |  |  |  |

**Summary of Qualifications, Experience and Personnel Occupation**

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| --- | --- | --- | --- | --- | --- |
| **From** | **To** | **Company** | **Project** | **Position** | **Relevant technical and management experience** |
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**Authorized signature of Company representative and Date**

**If other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [include the name of the personnel]**

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| --- | --- | --- | --- | --- | --- |
| Name | Date of birth | Name of employer | Job title | Contact (manager / personnel officer) | Years with present employer |
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**Authorized signature of Company representative and Date**