

**Pre Qualification Questionnaire for
Technology Suppliers**

Yorkshire's Textile Innovation Programme

Organisation Name and Registered Address:	Correspondence Address (if different):
Company Registration Number:	
VAT Registration Number (if applicable):	

Contact Name:		Telephone:	
Position in Organisation:		Email:	
		Web Address:	

Main area(s) of expertise:

Most relevant experience: (Please attach details of any appropriate Case Studies)





Textile **Futures**

Yorkshire's Textile Innovation Programme

REFERENCES

*Note: we may elect to contact any of the given companies for a reference at any stage of the selection process.
Your permission to do so will be assumed unless you explicitly state any objections.*

Please provide details of three recent and relevant contracts for the provision of services:			
Customer name, address, contact name and telephone number	Date contract awarded and duration of contract	Contract reference and brief description of service undertaken	Names of subcontractors and/or consortium members and their roles

Professional or Trade Body Membership:



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European Regional Development Fund



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What quality assurance certification does your organisation hold? (e.g. ISO 9000 or equivalent standard)

Please include copies of relevant certificates.
 If no accreditation is held, please provide documentary evidence of quality assurance capabilities.
 (e.g. internal quality policy or manual)

INSURANCE

Please provide details of your organisation's insurance cover:		
Policy	Y / N	Value
Employer's Liability		
Public Liability		
Professional Indemnity		

If no to any of the above, please confirm that you will establish relevant insurances if selected as a supplier:	Y / N
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DISPUTES

In the last 3 years has your organisation failed to complete a contract on time or at all?	Y / N
Have there been claims for damages?	Y / N
Have damages been deducted or recovered?	Y / N

If yes to any of the above, please provide the following details:			
Customer name and address (postal and email)	Contract reference and brief description of services provided	Date of claim/contract termination	Reason for claim



Has your organisation had a contract that was not renewed due to failure to perform to the terms of a previous contract within the last 5 years?	Y / N	If yes, please provide details:

Has your organisation been involved in any court action and/or employment tribunal over the last 3 years?	Y / N	If yes, please provide details:

Are there any court actions and/or employment tribunal hearings outstanding or pending regarding your organisation?	Y / N	If yes, please provide details:

SUSTAINABLE PROCUREMENT

Does your organisation have a policy covering sustainable procurement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Under development <input type="checkbox"/>
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If yes, please attach a copy.

Which sustainability issues are included in your policy?	Waste <input type="checkbox"/>	Energy <input type="checkbox"/>	Transport <input type="checkbox"/>	Procurement <input type="checkbox"/>	Other <input type="checkbox"/>
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If other, please specify below:

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EQUALITY AND DIVERSITY

Does your organisation have a policy covering equality and diversity?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Under development <input type="checkbox"/>
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If yes, please attach a copy.



ORGANISATIONAL DIVERSITY

What is the current composition of your organisation's workforce?				
% Male	% Female	% of Black Minority Ethnic	% of staff who consider themselves to have some sort of disability	Total workforce (number)

FINANCIAL VIABILITY

Please provide a copy of your latest management accounts.

OTHER INFORMATION

Please detail any further information you feel relevant to support your application:

Name (block capitals): _____

Position in Organisation: _____

Signature: _____ Date: _____

