**CANDIDATE REFERENCE**

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| Solicitation Number: OPIC2025001 | Title/Level: |
| Candidate Name: | Category: Data/Database Administration |

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| **Reference Name** (Required): |  | | |
| **Title:** |  | | |
| **Company Name** (Required): |  | | |
|  | |  | |
| **Phone Number** (Required include area code): | |  | |
| **E-mail Address:** |  | | |
| **Professional Relationship:** | | |  |

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|  | Peer |  | Co-Worker |  | Supervisor |

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|  | Customer |  | End-User |  | Subordinate |

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| **Reference Name** (Required)**:** |  | | |
| **Title:** |  | | |
| **Company Name** (Required)**:** |  | | |
|  | |  | |
| **Phone Number** (Required include area code): | |  | |
| **E-mail Address:** |  | | |
| **Professional Relationship:** | | |  |

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|  | Peer |  | Co-Worker |  | Supervisor |

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|  | Customer |  | End-User |  | Subordinate |

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| **Reference Name** (Required)**:** |  | | |
| **Title:** |  | | |
| **Company Name** (Required)**:** |  | | |
|  | |  | |
| **Phone Number** (Required include area code): | |  | |
| **E-mail Address:** |  | | |
| **Professional Relationship:** | | |  |

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|  | Peer |  | Co-Worker |  | Supervisor |

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|  | Customer |  | End-User |  | Subordinate |

**NOTE: ONLY INCLUDE THE INFORMATION REQUESTED ON THIS FORM. DO NOT INCLUDE ADDITIONAL INFORMATION.**

**CANDIDATE QUALIFICATIONS**

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| Solicitation Number: | Title/Level: |
| Candidate Name: | Technology Type: |

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| **Minimum Requirements:** Candidates that do not meet or exceed the **minimum** stated requirements (skills/experience) will be displayed to customers but may not be chosen for this opportunity. | | | |
| Actual Years Experience | Years Experience Needed | Required/ Preferred | Skills/Experience |
|  | 4 | Required | Experience recovering FileMaker Server access, experience working with FileMaker Server and FileMaker Cloud, and experience transferring on-prem FileMaker databases to FileMaker Cloud. |

**CANDIDATE ACKNOWLEDGEMENT**

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| RFO: Solicitation Number: OPIC2025001 | Title/Level: |
| Candidate Name: | Technology Type: |

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| I hereby authorize **Innosoul, Inc. dba Innosoul Information Technologies, Inc.** to submit my resume in response to the temporary staffing Solicitation OPIC2025001 for **Office of Injured Employee Council**.  I understand that submission of my resume by multiple vendors may result in my disqualification from this opportunity. Customers reserve the right to hire a candidate submitted by multiple vendors.   Worker signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |