

**STATE OF HAWAII**  
DEPARTMENT OF EDUCATION

**QUESTIONNAIRE FOR FACILITIES RELATED PROFESSIONAL SERVICES**

QUESTIONNAIRE FOR: (LIST DISCIPLINES)	DATE
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FIRM NAME	ESTABLISHED YEAR    STATE	TYPE OF ORGANIZATION (Underline)  INDIVIDUAL    PARTNERSHIP    CORPORATION    JOINT VENTURE    OTHER
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BUSINESS ADDRESS, TELEPHONE & FAX NO. OF HAWAII OFFICE	AGE OF FIRM	FEDERAL ID NO.	YEARS ESTABLISHED IN HAWAII
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PRINCIPALS OF FIRM: (NAMES)	ASSOCIATE MEMBERS OF FIRM: (NAMES)
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PRESENT BRANCH OFFICE(s): (ADDRESS, TELEPHONE & FAX NO.)	PERSON IN CHARGE: (NAMES)
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**NUMBER OF PERSONNEL IN YOUR PRESENT ORGANIZATION**

LOCATED AT	PRINCIPALS & KEY PERSONNEL			OTHER PERSONNEL										TOTAL		
	Architect	Engineer	Others	Architect	Engineers				Draftsmen	Spec. Writer	Estimator	Inspector	Surveyor		Balance	
					Mech.	Electri	Civil	Others								
HOME OFFICE																
BRANCH IN																
TOTAL																
TECHNICAL PERSONNEL:				OF PERSONNEL WITH HAWAII LICENSES												

**PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES WITHIN YOUR FIRM**

NAME				RESIDENT OF				NAME				RESIDENT			
TITLE								TITLE							
YEARS OF EXPERIENCE		AS PRINCIPAL IN THIS FIRM		AS PRINCIPAL IN OTHER FIRMS		OTHER THAN PRINCIPAL		YEARS OF EXPERIENCE		AS PRINCIPAL IN THIS FIRM		AS PRINCIPAL IN OTHER FIRMS		OTHER THAN PRINCIPAL	
EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)								EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)							
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS								MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS							
REGISTRATION (TYPE, YEAR, STATE)								REGISTRATION (TYPE, YEAR, STATE)							
NAME				RESIDENT OF				NAME				RESIDENT OF			
TITLE								TITLE							
YEARS OF EXPERIENCE		AS PRINCIPAL IN THIS FIRM		AS PRINCIPAL IN OTHER FIRMS		OTHER THAN PRINCIPAL		YEARS OF EXPERIENCE		AS PRINCIPAL IN THIS FIRM		AS PRINCIPAL IN OTHER FIRMS		OTHER THAN PRINCIPAL	
EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)								EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)							
MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS								MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS							
REGISTRATION (TYPE, YEAR, STATE)								REGISTRATION (TYPE, YEAR, STATE)							

**PERSONAL HISTORY STATEMENT OF TECHNICAL PERSONNEL WITHIN YOUR FIRM**

NAME		STATUS (Underline) Full-Time Part-Time	NAME		STATUS (Underline) Full-Time Part-Time
TITLE OR POSITION		YEARS OF EXPERIENCE	TITLE OR POSITION		YEARS OF EXPERIENCE
WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS	WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS
EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)			EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)		
REGISTRATION (TYPE, YEAR, STATE)			REGISTRATION (TYPE, YEAR, STATE)		
NAME		STATUS (Underline) Full-Time Part-Time	NAME		STATUS (Underline) Full-Time Part-Time
TITLE OR POSITION		YEARS OF EXPERIENCE	TITLE OR POSITION		YEARS OF EXPERIENCE
WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS	WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS
EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)			EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)		
REGISTRATION (TYPE, YEAR, STATE)			REGISTRATION (TYPE, YEAR, STATE)		
NAME		STATUS (Underline) Full-Time Part-Time	NAME		STATUS (Underline) Full-Time Part-Time
TITLE OR POSITION		YEARS OF EXPERIENCE	TITLE OR POSITION		YEARS OF EXPERIENCE
WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS	WITH THIS FIRM	WITH LAST FIRM (NAME & NO. OF YEARS)	WITH OTHER FIRMS
EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)			EDUCATION (COLLEGE, DEGREE, YEAR, SPECIALIZATION)		
REGISTRATION (TYPE, YEAR, STATE)			REGISTRATION (TYPE, YEAR, STATE)		

**OUTSIDE ASSOCIATES AND CONSULTANTS USUALLY EMPLOYED**

DISCIPLINE	NAME OF FIRM OR INDIVIDUAL		DISCIPLINE	NAME OF FIRM OR INDIVIDUAL

**CLASS OF WORK AND PROJECT TYPE SPECIALIZATION**

TYPE OF PROJECT	TOTAL NO. OF COMPLETED PROJECTS	TOTAL ESTIMATED CONSTRUCTION COST	TOTAL ESTIMATED PROJECT SIZE (G.S.F.)

Categorize your firm's class for work during the last ten years by project type. Examples of project types include Educational, Commercial, Industrial, Residential, Health Care, Correctional and Judicial Facilities. Work may also be categorized as planning, civil sitework, renovation/alteration, architectural barrier removal, fire alarm system, etc.





**Explain firm's individual project assignment, project management structure, project execution (work flow and responsibilities) and quality control process.** In the event the spaces provided on this form are not sufficient for entries, or if you wish to furnish additional information, it may be inserted here or on separate sheets, with appropriate references.

As of this date \_\_\_\_\_ the foregoing is a true statement of facts.

NAME OF FIRM OR INDIVIDUAL SUBMITTING QUESTIONNAIRE	TYPE NAME AND TITLE OF PERSON SIGNING	SIGNATURE

**NOTE:** It is to a firm's advantage to maintain its experience record on a current basis. This may be accomplished by periodically forwarding current data to DAGS.