

Healthwatch Cambridgeshire and Peterborough: quotation format
Stakeholder engagement contract

1. Sole applicant or partnership?

Please say if you are applying as a sole organisation or as partnership/consortium. If the latter, name the partners involved and state the lead partner. The lead partner should complete the application.

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2. About your organisation

Name of organisation (Company Number if applicable)

Address

3. Main contact for this application

Name & surname

Position

Email

Phone

4. How will the work be undertaken?

For each component below please address these questions	What experience and track record you would bring to this task? How do you plan to complete this task effectively within the given timescale? What are the main risks and mitigations?
Task I: Stakeholder survey	
Task II: Telephone interviews	
Task III: Analysis and reporting	
Anything else you wish the Panel to take account of?	

5. Costs

How much is your work going to cost Healthwatch? Please add extra rows or columns as needed and any relevant narrative.

Task	£ Total
Task I	
Task II	
Task III	
Total	

Notes:

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Signature:

Date:

Submissions to: Carole Russell, carole.russell@healthwatchcambspboro.co.uk

Tel: 01480 420628 by midday on Tuesday 7th May 2019