**Appendix 5 – Project References**

Subject to the requirements set out in this RFP, the Proponent should state below their expertise on work that is similar to that which is contemplated in this RFP. Lakeridge Health may, at its discretion request any additional references in support of the RFP. The Proponent should comply with any such request. **Proponents are requested to verify that the reference details are current and accurate and that consent to provide feedback has been obtained.**

| Reference 1 | Proponent Response | |
| --- | --- | --- |
| Facility name (include reference sites, if available) |  | |
| Address |  | |
| Contact Information  Identify appropriate contacts to discuss the Deliverables (i.e., project manager, Facility manager ) | Contact Name |  |
| Phone |  |
| Email |  |
| Description of the Deliverables provided |  | |
| Start up date of implementation |  | |
| Value of Engagement |  | |

| Reference 2 | Proponent Response | |
| --- | --- | --- |
| Facility name (include reference sites, if available) |  | |
| Address |  | |
| Contact Information  Identify appropriate contacts to discuss the Deliverables (i.e., project manager, Facility manager ) | Contact Name |  |
| Phone |  |
| Email |  |
| Description of the Deliverables provided |  | |
| Start up date of implementation |  | |
| Value of Engagement |  | |

| Reference 3 | Proponent Response | |
| --- | --- | --- |
| Facility name (include reference sites, if available) |  | |
| Address |  | |
| Contact Information  Identify appropriate contacts to discuss the Deliverables (i.e., project manager, Facility manager ) | Contact Name |  |
| Phone |  |
| Email |  |
| Description of the Deliverables provided |  | |
| Start up date of implementation |  | |
| Value of Engagement |  | |