REFERENCE QUESTIONNAIRE

PUERTO RICO DEPARTMENT OF EDUCATION
PRDE-OSIATD-2018-2004-STUDENT INFORMATION SYSTEM (SIS)

REFERENCE NAME (Company/Organization):   Fort Worth Independent School District

PROPOSER (VENDOR) NAME: Focus School Software   intends to submit a proposal to
Puerto Rico Department of Education in response to PRDE's **RFP PRDE-OSIATD-2018-004-STUDENT
INFORMATION SYSTEM (SIS).**

INSTRUCTIONS TO INDIVIDUAL COMPLETING REFERENCE QUESTIONNAIRE:

1. Complete **Section I. RATING** using the Rating Scale provided.

2. Complete **Section II. GENERAL INFORMATION** (*This section is for information only and will not be scored.*)

3. Complete **Section III. ACKNOWLEDGEMENT** by manually signing and dating the document. (*Reference documents must include a manual actual signature.*)

4. E-mail **THIS PAGE** and your completed reference document, **SECTIONS I through III** to SIS_RFP_@de.pr.gov.

5. This completed document **MUST** be received no later than **4:00 p.m. on January 2, 2019** AST. Reference documents received after this time will not be considered. References received without a manual signature will not be accepted.

6. DO **NOT** return this document to the Proposer (Vendor).

7. The Puerto Rico Department of Education (PRDE) may contact references by phone for further clarification if necessary.

FORM 5 CONTINUED: REFERENCE QUESTIONNAIRE
PUERTO RICO DEPARTMENT OF EDUCATION
PRDE – XXXXXX – STUDENT INFORMATION SYSTEM (SIS)

REFERENCE NAME: Rhonda Fields, Fort Worth Independent School District

PROPOSER (VENDOR) NAME : Focus School Software

Section I. RATING

Using the Rating Scale provided below, rate the following numbered items by circling the appropriate number for each item:

RATING SCALE

CATEGORY	SCORE
Poor or Inadequate Performance	0
Below Average	1 – 3
Average	4 – 6
Above Average	7 - 9
Excellent	10

1. Rate the overall quality of the vendor's services:

    10 **(9)** 8 7 6 5 4 3 2 1 0

2. Rate the response time of this vendor:

    10 **(9)** 8 7 6 5 4 3 2 1 0

3. Rate how well the agreed upon, planned schedule was consistently met and deliverables provided on time. *(This pertains to delays under the control of the vendor):*

    10 9 **(8)** 7 6 5 4 3 2 1 0

4. Rate the overall customer service and timeliness in responding to customer service inquiries, issues and resolutions:

    10 **(9)** 8 7 6 5 4 3 2 1 0

5. Rate the knowledge of the vendor's assigned staff and their ability to accomplish duties as contracted:

    (10) 9 8 7 6 5 4 3 2 1 0

6. Rate the accuracy and timeliness of the vendor's billing and/or invoices:

(10) 9 8 7 6 5 4 3 2 1 0

7. Rate the vendor's ability to resolve a problem related to the services provided quickly and effectively:

10 9 (8) 7 6 5 4 3 2 1 0

8. Rate the vendor's flexibility in meeting changing business requirements:

10 (9) 8 7 6 5 4 3 2 1 0

9. Rate the likelihood of your company/organization recommending this vendor to others in the future:

(10) 9 8 7 6 5 4 3 2 1 0

Section II. GENERAL INFORMATION

1. Please include a brief description of the products and services provided by this vendor for your business/organization and any other comments you would like to provide:

   Implementation and continued use/support of an Enterprise SIS software package. In most cases Focus meets or exceeds the requirements of our end users including 130 campuses, Health Services, student support services, Report cards, scheduling, Transcripts and State Reporting

2. During what time period did the vendor provide these services for your business?

   Month: _Jan_ Year: _2013_   to   Month: _Dec_ Year: _2018 — continuing_

Section III. ACKNOWLEDGEMENT

I affirm to the best of my knowledge that the information I have provided is true, correct, and factual:

_____   December 17, 2018
Signature of Reference   Date

Rhonda M. Fields   Director, School Software Development/PEIMS
Print Name   Title

817-814-3084
Phone Number

rhonda.fields@fwisd.org
Email address