ADDENDUM 34 - WESTERN CAPE EDUCATION DEPARTMENT APPLICATION FOR THE APPOINTMENT AND USE OF CONSULTANTS

issued

In terms of the requirements of the National Treasury Practice Note Number SCM 3 of 2003 and WCED's Accounting Officer's System (AOS)

GUIDE TO COMPLETE THE FORM	
1.	Complete all sections below. This form must always be accompanied by the duly completed LOG 1 and PGWC002 forms when requesting the services of a consultant.
2.	Ensure that all information is visible and in printable format by: a) Widening the row height to show all information b) Adjusting the print area before printing
3.	Where the space provided is not enough, additional sheet(s) may be used. The additional sheet(s) must be marked as an Addendum to this form.
4.	This Application should be completed in line with the requirements of the National Treasury Practice Note 3 of 2003 and the WCED's AOS.
5.	Save the document using the "Save as" function and use the name of the service as reflected on the approved Procurement Plan/services required.
A	**DETAILS OF REQUESTOR**

FULL NAMES (in print)	
PERSAL NUMBER	
DIRECTORATE	
DESIGNATION	
BRANCH	
REQUISITION NUMBER	
CONTACT NO.	
EMAIL	

SIGNATURE			
DATE			
B1.	**BRIEF DETAILS OF THE CONSULTANCY SERVICES REQUIRED**		
B2.	**MOTIVATION WHY THESE SERVICES MUST BE PROCURED** (kindly provide a separate page where the space is insufficient to provide the necessary detailed information)		
B3.	**IS THE SERVICE INCLUDED ON THE APPROVED PROCUREMENT PLAN**	**YES**	**NO**
B3.1	**If YES, indicate item number on the procurement plan**		
B3.2	**If NO, please attach the required approval from the Accounting Officer.**		
B4.	**DRAFT SPECIFICATIONS ATTACHED**	**YES**	**NO**
C1.	**GAP ANALYSIS**		
This Gap Analysis aims to assess the requirement/need for the appointment of a consultant against the organizational structure, the Human Resources Management Plan and the Departmental Model, which is a co-sourced model.			
a.	Is the consultancy services required:	**YES**	**NO**
	i) Ad-hoc		
	ii) Temporary		
	iii) Repetitive		
	iv) Incorporated on an existing job description within your component		
b.	Is the appointment of a consultant cost-effective vs permanent capacity within the department?		
c.	How often does your component use the skills required for the tasks to be performed by consultants	**YES**	**NO**
	i) Seldom		
	ii) Annually		

	iii) Bi-annually		
	iv) Full MTEF period		
D1.	**IDENTIFYING THE NEED: (PLEASE MARK THE APPROPRIATE FIELD)**	**YES**	**NO**
a.	Appointment is for a limited period of time to perform duties to a post on the fixed establishment?		
b.	It is more appropriate to appoint individual on Public Service Contracts in terms of Section 8(c)(ii) of the Public Service Association		
c.	There are additional work demands which are not permanent		
d.	No suitable vacancies exist on the establishment		
e.	Has the filling of a vacant position been considered to perform the required task?		
f.	Can this need be fulfilled through: i) Appointment via a recruitment and selection process but there is insufficient time		
	ii) A contract appointment additional to the establishment		
	iii) A contract appointment against a post		
g.	If the need is repetitive, does the organisational structure within your component provide for this function?		
h.	Is there existing staff in your component responsible for the work but lacks the required knowledge or skills?		
i.	Does the appointment conditions, of the intended consultants to be appointed, provide for a training of skills transfer plan? i) If YES, please attach.		

	ii) If NO, please indicate: a) Must the plan still be approved? b) If not available indicate time frame for obtaining and approving such a plan. c) If not required, please furnish reasons in this regard		
D2.	**PURPOSE OF APPOINTMENT: PLEASE MARK THE APPROPRIATE FIELD**	**YES**	**NO**
a.	Rendering of expert advice		
b.	Obtaining relevant information to draft a proposal for the execution of specific tasks of a technical or intellectual nature		
c.	Business and advisory services		
d.	Infrastructure and planning services		
e.	Laboratory services		
f.	Science and technology		
g.	Reform management activities		
h.	Verification/audit/assessment services		
i.	Financial Services		
j.	Social or environmental studies		
k.	Identification, preparation and implementation of projects to complement capabilities in these areas: Monitoring work of other consultants or to complete work for which the consultant did not tender		

I.	Other consultancy services (not provided for above) Please specify:		

D3.	CIRCUMSTANCES NECESSITATES THE ENGAGEMENT OF CONSULTANTS	YES	NO
a.	Necessary skills and/or experience are not available in the Department		
b.	Resources to perform an ad-hoc project/duty/study is not available and the Accounting Officer cannot be reasonably expected either to train or recruit people in the time available.		
c.	This need did not arise due to bad planning		
d.	Nature of assignment/project is highly specialised		
e.	Job cannot be undertaken without technological solutions not available in the department		
f.	Legislative requirements demands that job is performed by a suitably qualified professional		
D4.	**IDENTIFYING THE APPROACH FOR APPOINTMENT OF CONSULTANTS STICK TO THE MOST APPROPRIATE APPROACH: (Read Annexure 1 for explanation of appropriateness of approach)**	**YES**	**NO**
a.	Quality based selection		
b.	Selection under fixed budget		
c.	Least cost selection		
d.	Selection based on professional qualifications		
e.	Single source selection		
f.	Selection of individual consultants		
g.	Selection of particular types of consultants		
h.	Establishment of a list of approved service providers		
D5.	**PERFORMANCE MANAGEMENT & MONITORING OF CONSULTANTS** (state how the performance of the consultant will be monitored and measured)		

E1	FINANCIAL IMPLICATIONS	YES	NO
a.	Is there an approved budget for this need?		
b.	Total of approved budget (copy of PGWC 002 must be attached)	**R**_____	
c.	Is the approved budget as indicated above for the current financial year?		
E2	How will this project/appointment be funded: (funding stream)	**YES**	**NO**
a.	Goods or services		
b.	Compensation of employees		
F1.	**FORM OF PROCUREMENT** (kindly note this must in line with the form of procurement as approved on the procurement plan)	**YES**	**NO**
a.	Procurement via Integrated Procurement System		
b.	Procurement via Open Bidding (competitive bidding)		
c.	Procurement via Limited Bidding (the application for Limited Bidding as issued must accompany this form)		
d.	Procurement through participation in a contract arranged by another organ of state.		
e.	Procurement through participation in a transversal contract.		

PROGRAMME / SUB-PROGRAMME MANAGER RESPONSIBLE FOR BUDGET

NAME: …… DESIGNATION:: ……..

SIGNATURE: ..... DATE:……

DEPUTY DIRECTOR: GENERAL - RESPONSIBLE FOR THE BRANCH

Application for the appointment and use of consultant(s) is **approved / not approved**

NAME: …… DESIGNATION:: ……..

SIGNATURE: ..... DATE:……