# **Bidder Profile Form**

#### Instructions

Please complete this form and submit it with your Expression of Interest to Laurie Hunte, Criminal Justice Programme Manager at Barrow Cadbury Trust (I.hunte@barrowcadbury.org.uk). If you require any clarification please get in touch Laurie.

### Confidentiality

The information this questionnaire contains will be held in confidence by Barrow Cadbury Trust and Lloyds Bank Foundation for England & Wales and used only for the purpose of your application for the pilot leadership development programme for people working in the criminal justice sector.

#### **Data Protection Act**

Information submitted will be held by Barrow Cadbury Trust and Lloyds Bank Foundation for England and Wales to allow us to determine your continued suitability as a supplier. This may be supplemented by references supplied by your referees. We will not disclose any information to any third party. Should you no longer wish to be an approved supplier and would like your information to be removed then please contact Laurie Hunte (I.hunte@barrowcadbury.org.uk).

## **Organisation Details**

### 1. Contact Details (for partnerships, this should be the details of the lead partner)

Name of Organisation:		
Trading Name:		
(if different from		
above)		
Main contact name:		
Main contact job title:		
Address:		
Tel:		
Email:		
Website Address:	<u> </u>	
<ol><li>Organisation Overvi</li><li>Please describe organisa</li></ol>		
3. Organisation Inform	ation	
<del>-</del>		
What is the legal status number.	of your organisation?	Please provide your relevant registration
What was your turnover/i	ncome in your last financ	ncial year?
Company / Organisation	* Gro	roup **
Less than £100,000		
£100,000 - £1M		
£1M - £5M		
Greater than £5M		

Please provide a summary of income/expenditure reserves for the last two financial years; plus projections for the next financial year.

<sup>\*</sup> The Company/Organisation that is doing direct business with the Barrow Cadbury Trust.

<sup>\*\*</sup> The total Turnover Income relating to the group of which your Company forms part.

	rear please provide a copy of your latest management accounts to income and expenditure against budget for the current year.
How many people does y	our Organisation employ?
Company/Organisation *	Group **
Number	
3 Professional Membe	rship and Accreditation
4.1 Please indicate wheth	er your organisation belongs to any professional or trade bodies:
	of any quality assurance accreditation that your organisation holds Investors in People etc.):
5 Partnerships	
For partnerships, please patables as necessary.	rovide the following information for each partner. Please add further
Partner 1	
Name of Organisation:	
Main contact name:  Main contact job title:	
Address:	
Tel:	
Email:	
Website Address: Overview of	
organisation and role	
in the partnership:	

Partner 2*	
Name of Organisation:	
Main contact name:	
Main contact job title	
Address:	
Tel:	
Email:	
Website Address:	
Overview of organisation and role	
in the partnership:	
	information given is complete and accurate.
Partner 1 Name:	
Position:	
Signature:	
Signature.	
Date:	
CSR Officer, etc.)	d by an appropriate Officer of the Company e.g. Managing Director, information given is complete and accurate.
Name:	
Position:	
Signature:	
Date:	
(This should be provided	d by an appropriate Officer of the Company e.g. Managing Director,

CSR Officer, etc.)

\*Please add additional text boxes should there be more 3 or more partners