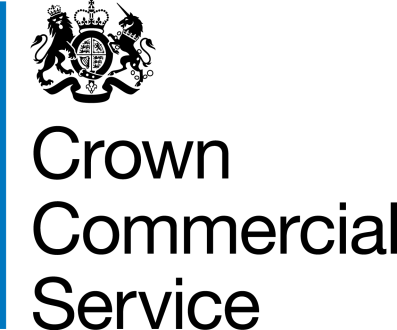
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This DPS Appointment Form creates the DPS Contract. It summarises the main features of the procurement and signposts to where information is held as a result of the Supplier’s DPS SQ Submission such as CCS’ and the Supplier’s contact details.

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|  | **CCS** | The Minister for the Cabinet Office represented by its executive agency the Crown Commercial Service (CCS).  Its offices are on: 9th Floor, The Capital, Old Hall Street, Liverpool L3 9PP. |
|  | **Supplier** | The name, address, and registration number of the  Supplier will be captured as part of the selection questionnaire during the DPS Registration process |
|  | **DPS Contract** | This dynamic purchasing system access agreement between CCS and the Supplier allows the Supplier to be considered for Order Contracts to supply the Deliverables in any of the Services Filter Categories   * Standard off the shelf training * Bespoke Training * Learning Technologies * Education Services   You cannot deliver in any other Filter Categories under this contract. Any references made to other Filter Categories in this contract do not apply.  This opportunity is advertised in the Contract Notice in the Find a Tender Service reference [**Insert** reference number] (FTS Contract Notice). |
|  | **Deliverables** | The distinct service types comprise of the following:   * Services * Standard Off The Shelf Training (SOTS) * Bespoke Training * Learning Technologies * Education Services * Additional Training Filters * Geographical Location * Data Storage / Processing * Delivery Methods * Delivery Mode   See DPS Schedule 1 (Specification) for further details. |
|  | **DPS**  **Start Date** | 29/10/2021 |
|  | **DPS Expiry Date** | 28/10/2025 |
|  | **DPS**  **Optional**  **Extension**  **Period** | Optional extension period of 24 months up to28/10/2027 |
|  | **DPS Incorporated Terms**  (together these documents form the DPS Contract’) | The following documents are incorporated into the DPS Contract. Where numbers are missing we are not using these schedules. If the documents conflict, the following order of precedence applies:   1. This DPS Appointment Form 2. Any DPS Special Terms (see Section 9 ‘DPS Special Terms’ in this DPS Appointment Form) 3. Joint Schedule 1 (Definitions) RM6219 4. Joint Schedule 11 (Processing Data) RM6219 5. The following Schedules for RM6219 (in equal order of precedence):    * DPS Schedule 1 (Specification)    * DPS Schedule 3 (DPS Pricing)    * DPS Schedule 4 (DPS Management)    * DPS Schedule 5 (Management Levy and Information)    * DPS Schedule 6 (Order Form Template and Order Schedules) including the following template Order Schedules:      + Order Schedule 1 (Transparency Reports)      + Order Schedule 2 (Staff Transfer)      + Order Schedule 3 (Continuous Improvement)      + Order Schedule 4 (Order Tender)      + Order Schedule 5 *(*Pricing Details)      + Order Schedule 6 (ICT Services)      + Order Schedule 7 (Key Supplier Staff)      + Order Schedule 8 (Business Continuity and Disaster Recovery)      + Order Schedule 9 (Security)      + Order Schedule 10 (Exit Management)      + Order Schedule 11 (Installation Works)      + Order Schedule 12 (Clustering)      + Order Schedule 13 (Implementation Plan and Testing)      + Order Schedule 14 (Service Levels)      + Order Schedule 15 (Order Contract Management)      + Order Schedule 16 (Benchmarking)      + Order Schedule 17 (MOD Terms)      + Order Schedule 18 (Background Checks)      + Order Schedule 19 (Scottish Law)      + Order Schedule 20 (Order Specification)      + Order Schedule 21 (Northern Ireland Law)      + Order Schedule 22 (Lease Terms)      + Order Schedule 23 ( HMRC Terms)  * DPS Schedule 7 (Order Procedure) * DPS Schedule 8 (Self Audit Certificate) * DPS Schedule 9 (Cyber Essentials Scheme) * Joint Schedule 2 (Variation Form) * Joint Schedule 3 (Insurance Requirements) * Joint Schedule 4 (Commercially Sensitive Information) * Joint Schedule 6 (Key Subcontractors) * Joint Schedule 7 (Financial Difficulties) * Joint Schedule 8 (Guarantee) * Joint Schedule 9 (Minimum Standards of Reliability) * Joint Schedule 10 (Rectification Plan) * Joint Schedule 12 (Supply Chain Visibility)  1. CCS Core Terms - DPS (version 1.0.3) 2. Joint Schedule 5 (Corporate Social Responsibility) RM6219 3. DPS Schedule 2 (DPS Application) RM6219 as long as any part of the DPS Application that offers a better commercial position for CCS or Buyers (as decided by CCS) take precedence over the documents above |
|  | **DPS Special Terms** | N/A |
|  | **DPS Pricing** | **N/A** |
|  | **Insurance** | Details in Annex of Joint Schedule 3 (Insurance Requirements). |
|  | **Cyber**  **Essentials Certification** | Cyber Essentials Scheme [Basic / Plus] Certificate (or equivalent). Details in DPS Schedule 9 (Cyber Essentials Scheme) |
|  | **Management Levy** | The Supplier will pay, excluding VAT, **1**% of all the Charges for the Deliverables invoiced to the Buyer under all Order Contracts. |
|  | **Data Protection Liability Cap** | £10,000,000 |
|  | **Supplier**  **DPS Manager** | [**Insert** name]  [**Insert** job title]  [**Insert** email address]  **[Insert** phone number]  Contact details such as above will be requested as part of your SQ DPS Submission. |
|  | **Supplier**  **Authorised Representative** | [**Insert** name]  [**Insert** job title]  [**Insert** email address]  **[Insert** phone number]  Contact details such as above will be requested as part of your SQ DPS Submission. |
|  | **Supplier**  **Compliance Officer** | [**Insert** name]  [**Insert** job title]  [**Insert** email address]  [**Insert** phone number]  Contact details such as above will be requested as part of your SQ DPS Submission. |
|  | **Supplier Data Protection**  **Officer** | [**Insert** name]  [**Insert** job title]  [**Insert** email address]  [**Insert** phone number]  Contact details such as above will be requested as part of your SQ DPS Submission. |
|  | **Supplier**  **Marketing Contact** | [**Insert** name]  [**Insert** job title]  [**Insert** email address]  [**Insert** phone number]  Contact details such as above will be requested as part of your SQ DPS Submission. |
|  | **Key Subcontractors** | **Key Subcontractor 1**  Name (Registered name if registered) [**insert** name]  Registration number (if registered) [**insert** number]  Role of Subcontractor [**insert** role]  Details such as above will be requested as part of your SQ DPS Submission. |
|  | **CCS**  **Authorised Representative** | **[Insert** name]  **[Insert** job title]  **[Insert** email address]  **[Insert** phone number] |

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| --- | --- | --- | --- |
| **For and on behalf of the Supplier:** | | **For and on behalf of CCS:** | |
| Signature: |  | Signature: |  |
| Name: |  | Name: |  |
| Role: |  | Role: |  |
| Date: |  | Date: |  |