



惠僑英文中學

WAI KIU COLLEGE

九龍深水埗石硤尾偉智街十七號

17 Wai Chi Street, Shek Kip Mei, Sham Shui Po, Kowloon, Hong Kong.

電郵地址(E-mail): wkc@wkc.edu.hk

電話: 852-2777 6289 傳真: 852-27767727

Tel: 852-2777 6289 Fax: 852-27767727

網址(Website): <http://www.wkc.edu.hk>

Ref. No.: WKCTD 19-20/02

Date: 22nd October, 2019

Invitation to Tender Letter

(Tenders should be reminded not to identify their company on envelopes)

Dear Sir,

INVITATION TO TENDER

Tender for the supply of Educational Psychological Service

1. You are invited to tender for the supply and/or undertaking services of the items as specified in the enclosed tender schedule. If you are not prepared to accept a partial order, please state this clearly on the tender schedule.
2. Your sealed tender, **in duplicate**, should be clearly marked on the envelop:
Tender for the supply of **Educational Psychological Service**.
The envelop should be addressed to **17 Wai Chi Street, Shek Kip Mei**, and forwarded to arrive not later than **12:00 noon** on **1-11-2019**. Late tenders will not be accepted. Your tender will remain open for 30 days from the "Closing Date", and you may consider your tender to be unsuccessful if no order is placed with you within these 60 days. You are requested to note that unless Part II of the tender form is completed, the tender will not be considered.
3. If you are unable or do not wish to tender, it would be appreciated if you would return this letter and the tender forms with reason to the above address at your earlier convenience.
4. Tenders will be accepted on an * 'overall' / 'group' / 'itemized' basis.

Yours sincerely,



CHENG Che-yin

Principal

*Please delete as appropriate

PART II. TENDER SCHEDULE TO BE COMPLETED (IN DUPLICATE)

(Columns 4, 5 and 6 to be completed by Tender)

(1) Item No.	(2) Description/ Specification	(3) Quantity Required	(4) Unit Rate (HK\$)	(5) Total Amount (HK\$)	(6) Remarks
1	<ul style="list-style-type: none">● To provide psycho-educational assessment and intervention for students with learning, emotional and behavioral difficulties;	1			
2	<ul style="list-style-type: none">● To provide consultation and support to school personnel and parents on intervention strategies and appropriate educational provision to cater for students' diverse educational needs;● To support and develop the school to cater for learning diversity;● To support the school in managing crises and critical incidents;● To conduct training and sharing activities;● To assist subject panels in the planning, benchmarking, coordination, monitoring and development of supporting services for SEN students; and● To perform other relevant duties as required by the school.	1			

Time, date and number of sessions of the above services rendered:

A total of 16 service days during the academic year 2019-2020, starting from November, 2019 and the details are as follows:

Date: November 12(Tue), 26(Tue), Dec 3(Tue), 17(Tue), Jan 6 (Mon), 20 (Mon), Feb 4(Tue), 25(Tue), Mar 3(Tue), 17(Tue), 31(Tue), Apr 21(Tue), 28(Tue), May 12(Tue), 26(Tue), June 2(Tue)

Time: 0900-1730, with one-hour lunch break

Exact dates are to be discussed and confirmed between the services provider and the school.

Total :	HK\$
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The undersigned hereby offers to undertake the service as described in the tender (including the employment of the Authorized Person, provision of insurance coverage, , labour, materials, all other charges and in accordance with the details provided by the school) within 60 days therein from the date of a firm order placed by the school for the sum of _____ (\$ _____). In so doing, the undersigned acknowledges that all items not otherwise specified shall be provided in accordance with such details; tenders shall REMAIN OPEN FOR 60 DAYS after the Closing Date; and the school is not bound to accept the lowest or any tender and reserves the right to accept all or any part of any tender within the period during which the tenders remain open. The undersigned also warrants that his Company's Business Registration and Employees' Compensation Insurance Policy are currently in force and that the service which his Company offers to undertake will not cause any damage to the school.

Dated this _____ day of _____ 20_____.

Name (in block letters) : _____

Signature: _____ in the capacity of _____ (state official position, e.g. Director, Manager, Secretary, etc.).

Duly authorized to sign tenders for and on behalf of@(with Company chop): -

Trading in Hong Kong under the style of * _____

Registered address of firm & _____

Telephone No.: _____ Fax No. : _____

Business registration certificate no. _____ Expiry Date: _____

Signature of Witness _____

Address of Witness _____

Name of Partners &	Residential Address of Partners &

@ In the case of an incorporated company, insert the name of the company. In the case of a sole proprietorship or partnership, insert the name(s) of the sole proprietor or all the partners, as the case may be.

* In the case of a sole proprietorship or partnership, insert the name of the firm.

& In the case of an incorporated company, insert the registered office address of the incorporated company. In the case of a sole proprietorship or a partnership, insert the principle place of business of the firm in Hong Kong

NOTE : *If a tender is being made by a partnership or an unincorporated body, the names and residential addresses of all partners should be given in the spaces provided*

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(Columns 4, 5 and 6 to be completed by Tender)

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2	<ul style="list-style-type: none"> ● To provide consultation and support to school personnel and parents on intervention strategies and appropriate educational provision to cater for students' diverse educational needs; ● To support and develop the school to cater for learning diversity; ● To support the school in managing crises and critical incidents; ● To conduct training and sharing activities; ● To assist subject panels in the planning, benchmarking, coordination, monitoring and development of supporting services for SEN students; and ● To perform other relevant duties as required by the school. 	1			

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Trading in Hong Kong under the style of * _____

Registered address of firm & _____

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Business registration certificate no. _____ Expiry Date: _____

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Address of Witness _____

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