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**Standard Expression of Interest**

**(EOI)**

**Procurement of Training Provider**

**(For National Consulting Services)**

**Issued By:**

**Vocational and Skill Development Training Academy**

**Bhainsepati, Lalitpur**

**01 Mangsir 2079**

**Expression of Interest**

**(EOI)**

**Title of Consulting Services: Vocational & Skill Development Training Implementation (RE)**

**Project Name : Vocational Training Implementation**

**EOI: VSDTA/079/080-1/10&15 (RE)**

**Office Name :** *Vocational and Skill Development Training Academy, MoLESS, GoN*

**Office Address:** *Bhainsepati, Lalitpur*

**Issued on: 01 Mangsir 2079**

**Financing Agency: Government of Nepal**

**Abbreviations**

CV : Curriculum Vitae

DO : Development Partner

EA : Executive Agency

EOI : Expression of Interest

GON : Government of Nepal

PAN : Permanent Account Number

PPA : Public Procurement Act

PPR : Public Procurement Regulation

TOR : Terms of Reference

TTP : Technical Training Provider

VAT : Value Added Tax

VSDTA : Vocational and Skill Development Training Academy

CTEVT : Council for Technical Education and Vocational Training

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## Request for Expression of Interest

Government of Nepal

*Ministry of Labour, Employment and Social Security*

*Vocational and Skill Development Training Academy*

Date: 2079/08/01

Name of Project: Vocational & Skill Development Training Implementation

1. Government of Nepal (GoN) has allocated fund ***toward the cost of Vocational Skills Training*** and intends to apply a portion of this ***fund*** to eligible payments under the Contract for which this Expression of Interest is invited for **National Consulting Services**.
2. The ***Vocational and Skill Development Training Academy, Ministry of Labour, Employment and Social security, GoN,*** now invites Expression of Interest (EOI) from eligible consulting firms (“consultant”) to provide the following consulting services: to deliver quality skill training services for the targeted beneficiaries following the approved curricula in the following occupations. The training should assure the standards as provisioned by curriculum.

Occupations: Tender No. VSDTA/079/080-1/10&15 (**RE**)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Package | Occupations/Trade | Number of Trainees | Training Duration (hrs) | Entrepreneurship(hrs) |
| 10 | Barista | 100 | 390 | 15 |
| 15 | Home stay operator | 100 | 390 | 15 |

**Note: Entrepreneurship Development training (EDP)of 15 hrs (curriculum prescribed by VSDTA) must be additionally integrated with prescribed duration of occupation\trade.**

1. Interested eligible consultants may download EOI document from VSDTA website i.e.www.vsdta.gov.np before Mangsir 16, 2079 or visit e-GP system [www.bolpatra.gov.np/egp](http://www.bolpatra.gov.np/egp)
2. Consultants may associate with other consultants to enhance their qualifications.
3. Expressions of interest shall be delivered online through e-GP system [www.bolpatra.gov.np/egp](http://www.bolpatra.gov.np/egp)on or In case the last date of obtaining and submission of the EOI document happens to be a holiday, the next working day will be deemed as the due date but the time will be the same as stipulated.
4. EOI will be assessed based on ***Qualification 30 %, Experience 50 % and Capacity 20 %*** of consulting firm and key personnel. Based on evaluation of EOI, only shortlisted firms will be invited to submit technical and financial proposal through a request for proposal.
5. Minimum score to pass the EOI is 60 (sixty) percent.
6. VSDTA will select a minimum of 3 (three) to a maximum of 6 (six) consultants per occupational package based on the ranking method.

## Instructions for submission of Expression of Interest

1. Expression of Interest may be submitted by a sole firm or a joint venture of consulting firms and the maximum number of partners in JV shall be limited to three. JV between any two or organizations should be sustained by JV agreement stating the share ratio and all JV members should fulfill the eligibility criteria.
2. Interested TTPS must provide information indicating that they are qualified to perform the services *(descriptions, organization and employee and of the firm or company, description of assignments of similar nature completed in the last 7 years and their location, experience in similar conditions, general qualifications and the key personnel to be involved in the proposed assignment).*
3. This expression of interest is open to all eligible consulting firm/ company/ organization.
4. The assignment has been scheduled for until the Jestha 2080***.*** Expected date of commencement of the assignment is after 2.5 months of the notice publication date.
5. Expression of Interest should contain following information:
	1. A covering letter addressed to the representative of the client on the official letter head of company duly signed by authorized signatory.
	2. Applicants shall provide the following information in the respective formats given in the EOI document:
* *EOI Form: Letter of Application (Form 1)*
* *EOI Form: Applicant’s Information (Form 2)*
* *EOI Form: Key Experts List (form 3).*
* *EOI Form: Work Experience Details (Form 4(A), 4(B) &4(C))*
* *EOI Form: Capacity Details (Form 5 (Form 5(A) & 5(B))*
1. Applicants may submit additional information with their application, but short listing will be based on the evaluation of information requested and included in the formats provided in the EOI document.
2. The Expression of Interest (EOI) document must be duly completed and submitted through e-GP system by using the forms and instructions provided by the system.
3. The completed EOI document must be submitted on or before the date and address mentioned in the **“*Request for Expression of Interest*”.** Any EOI Document received after the closing time for submission of proposals shall not be considered for evaluation.
4. Prescribed sequence while submitting additional documents:
5. Mandatory Documents
6. Past Experiences
7. Office Setup, classroom and lab photos
8. Tools and equipment lists
9. **Experts CV and documents**
10. **Terms of Reference (TOR)**
11. **Background**
	1. Government of Nepal has its plan to provide skills training to needy people in the fiscal year 2079-080 through Vocational and Skill Development Training Academy under Ministry of Labour, Employment and Social Security. The aim of the program is to equip people with skills so that trained people either join in employment or create their own self-employment through enterprise development on an individual or group of people basis.
	2. VSDTA has plan to deliver vocational training to at least 4080trainees within the fiscal year 2079-080. Trainees number will be increased or decreased based on available resources.
	3. In order to accomplish the approved programs, VSDTA aims to conduct training programs through Technical Training Provider Companies/ Firms and wants to make TTPs more responsible to facilitate trained youths in gainful employment opportunities.
	4. The Technical Training Providers will be selected based on quality and cost-based selection (QCBS) in accordance with the PPMO Guidelines.
	5. These TORs provide guidelines to aspire TTPs about the scope of work and deliverables.
12. **Scope of Work**
	1. The main objective of the Consulting Service is to deliver quality skill training services for the targeted beneficiaries following the approved curricula.
	2. The TTPs are responsible to conduct training programs in following trades/occupations at different locations as assigned by VSDTA.
	3. The training period should be 390 hours with additional 15 hours of entrepreneurship Development training as specified by prescribed curriculum.
	4. The TTPs will establish a reliable internal monitoring and supervision mechanism during training delivery period. VSDTA will conduct regular monitoring of training activities.
	5. The trainings being provided by TTPs need to assure the standards as provisioned by curriculum.
	6. The service contract period may vary from occupation to occupations and should accomplish within the agreed time period.
	7. The average turnover of the last three fiscal years should be minimum fifty lakhs Nepalese rupees (NRs 50 lakhs) (VSDTA can verify form IRD)
13. **Conditions**
	1. The related training organization should have been registered in the Office of Company Registrar before at least 7 years and have training implementation experience. (Experience from FY 2072/073 to FY 2078/079 only.)
	2. A company/firm/organization can submit EOI in maximum Five packages for maximum 8 (Eight) hundred trainees only ***(the quota will be counted for prior EOI notice dated 2079/04/13)***.
	3. All submitted documents should be notarized.
	4. VSDTA reserves the right to accept or reject the EOI application with or without mentioning any reason.
	5. VSDTA may conduct the onsite visit of the training center of the EOI submitting firm/company/organization.
	6. TTPs must additionally conduct 15 hours (3 days) of entrepreneurship training to same trainees.
	7. For entrepreneurship development training, a trainer should be arranged for every 20 trainees.
	8. The organization must be affiliated from CTEVT for the proposed occupations.
	9. The organization should have the necessary physical infrastructure (office building with location map, Class room -10 m2, workshop - 30 m2 for one group of trainees and required tools, equipment and training materials for the training). The tools and equipment list, photos of store, training facilities and office space should be submitted along with EOI.
	10. The training organization should have at least one main trainer and one assistant trainer with required qualification and experience for proposed each group of 20 trainees.

Biodata and academic documents and other supporting documents should be attached with the bio data or curriculum vitae.

Qualifications for the instructors will be as follows:

|  |  |  |
| --- | --- | --- |
| S. No. |  Key Experts | Minimum Qualification |
| 1. | Main Trainer | Short Term Training Skill Test Level-III, orDiploma with TOT (from any government entity), orTSLC, orShort Term Training Skill Test Level II in the relevant occupation/subject with 3 years’ experience. |
| 2. | Co-trainer | TSLC, Or Short Term Training Skill Test Level-II with TOT, in the relevant occupation  |
| 3 | Trainer for Entrepreneurship training | Senior Entrepreneurship Development Facilitator Level III or Entrepreneurship Development Facilitator Level II with TOT (from any government entity) |

* 1. TTPs must propose qualified support staffs as mentioned below:

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Support Staffs** | **Minimum Qualification** |
| **Support Staff** |
| 1 | Training Coordinator | Bachelors or Equivalent |
| 2 | Monitoring Officer | Bachelors or Equivalent |
| 3 | District Coordinator  | Bachelors or Equivalent |

* 1. While counting the experience of TTPs, experiences within last seven years fiscal year 2072\073 to 2078\079 will be taken into consideration. (Company, organization, or firm). In case of the Joint Venture, it will be as per the prevailing public Procurement Act.

Experience Details:

|  |  |  |
| --- | --- | --- |
| SN | Experience Type | Details |
| 1 | General Experience | - Experience of conducting training in any occupation in at least 390 Hours- Number of trainees skilled test passed certified by NSTB |
| 2 | Specific Experience | Experience of conducting training in occupations proposed (at least 390 Hours) |
| 3 | Entrepreneurship training  | Experience of conducting entrepreneurship training \* |

Experience details should be sustained by letters from funding agencies, along with letter from NSTB.

\* Evidence of Institutional experience entrepreneurship training (with in last 7 years) should be attached along with general experience.

* 1. The TTP should maintain manual attendance of the trainers and trainees twice a day
	2. VSDTA may add or reduce the proposed number of trainees as per the requirement of the training arrangements.
	3. VSDTA will select a minimum of 3 (three) to a maximum of 6 (six) consultants in each package from the organizations who have passed the minimum score (i.e., 60 number) based on ranking.
1. **Evaluation of Consultant’s EOI Application**

Consultant’s EOI application which meets the eligibility criteria will be ranked on the basis of the ranking criteria in listed training packages separately.

|  |  |
| --- | --- |
| **i) Eligibility & Completeness Test** (EOI will be rejected if required documents mentioned in this section are not submitted) | **Compliance** |
| Copy of Registration of the company/firm (Mandatory)  |  |
| Copy of certificate of Council for Technical Education and Vocational Training (CTEVT) affiliation Along with Renewal for 079/080 (Mandatory) |  |
| Value Added Tax (VAT) Registration Certificate (Mandatory) |  |
| Proof of last 7 years' experience in the similar nature of Work (maximum seven years) (Mandatory) |  |
| Tax Clearance Letter 2077/078 with time extension letter for FY 2078/079 (Mandatory) |  |
| Average annual transaction minimum 50 lakhs for three fiscal years (2075/076 to 2077/078 or 2076/077 to 2078/079) (Mandatory) |  |
| Self-declaration letter indicating the understanding of TOR, no conflict of interest with the procurement process and TOR, and declaration of not being blacklisted or convicted of fraudulent activities or corruption while doing consulting business (Mandatory) |  |
| EOI Form 1: Letter of Application |  |
| EOI Form 2: Applicant’s Information Form |  |
| EOI Form 3: Capacity |  |
| EOI Form 4: Experience (4(A) and 4(B) 4(B)) |  |
| EOI Form 5: Qualification of Key Experts |  |

**(Note: All the joint venturing firm should be eligible individually to bid as a joint venture. Joint venturing firms will have to submit JV agreement. Lead firm must have at least 40% share ratio. Without mandatory documents in EOI application, consultant EOI evaluation will not be consider.**

|  |  |  |
| --- | --- | --- |
| **ii) EOI Evaluation Criteria** | **Insert Minimum Requirement if Applicable** | **Score [Out of 100%]** |
| **A. Qualification** |
| *Qualification of Key Experts* |  | ***30 %*** |
| *Experience of Key Experts* |  |
| **B. Experience** |
| *General experience of consulting firm within last 7 years.* |  | ***50 %*** |
| *Specific experience of consulting firm within last 7 years.* |  |
| *Experience of consulting firm of Entrepreneurship training within seven years* |  |
| *Number of trainees passed skill test within last 7 years.* |  |
| **C. Capacity** |
| *Financial Capacity* |  | ***20 %***  |
| *Infrastructure* |  |
| *equipment related to the proposed assignment* |

Note: In case, a corruption case is being filed to Court against the Natural Person or Board of Directors of the firm/institution/company or any partner of JV, such Natural Person or Board of Director of the firm/institution/company or any partner of JV, such firm's or JV EoI shall be excluded from the evaluation, if public entity receives instruction from Government of Nepal.

EOI Forms & Formats

Form 1. Letter of Application

Form 2. Applicant’s information

Form 3. Qualification of Key Experts

Form 4. Experience

Form 5. Capacity

1. **Letter of Application**

*(Letterhead paper of the Applicant or partner responsible for a joint venture, including full postal address, telephone no., fax and email address)*

Date:

To,

Full Name of Client: **Vocational and Skill Development Training Academy**

Full Address of Client: **Bhainsepati, Lalitpur**

Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sir/Madam,

1. Being duly authorized to represent and act on behalf of (hereinafter "the Applicant"), and having reviewed and fully understood all the short­-listing information provided, the undersigned hereby apply for following training to be short-listed by Vocational and Skill Development Training Academy as Consultant to deliver quality skill training services for the targeted beneficiaries following the approved curriculum in the trades.

**Proposed Training Occupations, and number**

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Proposed Occupation** | **Proposed Number** | **Remarks** |
|
| 1 |  |  |  |

1. Attached to this letter are photocopies of original documents defining:
2. the Applicant's legal status;
3. the principal place of business;
4. Vocational and Skill Development Training Academy and its authorized representatives are hereby authorized to verify the statements, documents, and information submitted in connection with this application. This Letter of Application will also serve as authorization to any individual or authorized representative of any institution referred to in the supporting information, to provide such information deemed necessary and requested by yourselves to verify statements and information provided in this application, or with regard to the resources, experience, and competence of the Applicant.
5. Vocational and Skill Development Training Academy and its authorized representatives are authorized to contact any of the signatories to this letter for any further information.[[1]](#footnote-1)
6. We declare that, we have no conflict of interest in the proposed procurement proceedings and we have not been punished for an offense relating to the concerned profession or business and our Company/firm has not been declared ineligible.
7. We further confirm that, if any of our experts is engaged to prepare the TOR for any ensuing assignment resulting from our work product under this assignment, our firm, JV member or sub-consultant, and the expert(s) will be disqualified from short-listing and participation in the assignment.
8. The undersigned declares that the statements made and the information provided in the duly completed application is complete, true and correct in every detail.

**Signed:**

**Name:**

**For and on behalf of (name of Applicant or partner of a joint venture):**

**Seal of organization:**

**Date:**

**Note: All** further communication concerning this Application should be addressed to the following address,

Vocational & Skill Development Training Academy

Bhainsepati, Lalitpur

Telephone: 01-5590801, 01-5590894,

 Email: info@vsdta.gov.np

1. **Applicant’s Information Form**

*(In case of joint venture of two or more firms to be filled separately for each constituent member)*

1. Name of Firm/Company:
2. Type of Constitution (*Partnership/ Pvt. Ltd/Public Ltd/ Public Sector/ NGO)*:
3. Date of Registration / Commencement of Business *(Please specify):*
4. Country of Registration:
5. Registered Office/Place of Business (including CTEVT affiliation):
6. Telephone No; Fax No; E-Mail Address:
7. Tax Clearance Certificate year or time extension year:
8. Name of Authorized Contact Person / Designation/ Address/Telephone:
9. Consultant’s Organization (including Organogram):
10. Total number of staff:
11. Number of regular professional staff:
12. CTEVT affiliation number and Renewal Date:

*(Provide Company Profile with description of the background and organization of the Consultant and, if applicable, for each joint venture partner for this assignment.)*

## Form 3: Key Experts (Include details of Key Experts only)

*(In case of joint venture of two or more firms to be filled separately for each constituent member)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SN** | **Name** | **Position** | **Highest Qualification**  | **Work Experience** **(in year)** | **Nationality** |
| 1 |  |   |   |   |  |
| 2 |  |   |  |   |  |
| 3 |  |   |   |   |  |
| 4 |  |   |   |   |  |
| 5 |  |  |  |  |  |

*Note:*

* + - *To be assured, Evaluation committee may ask necessary documents of proposed human resource before evaluation of EoI such as education certificate, experience documents as per need. Evaluation committee will assess and verify the above said information of proposed human resources by using different sources of verification.*
		- *Evaluation Team may ask the original copy (at least scanned copy of original document) of substantiated document (Experience letter, testimonials, TOT certificate) during evaluation process as per need for ensuring human resource capacity.*

## Form 4: Experience

**4 (A). General Work Experience**

*(Details of assignments undertaken. Each consultant or member of a JV must fill in this form.)*

| **S.N.** | **Sector/Occupation** | **Number of Trainees Trained** | **Number of Skill Test Appeared Trainees** | **Funding Organization/client (write full name and address)** | **Training location (Districts)** |
| --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| Total |  |  |  |  |

* **All the submitted letters/certificates etc. for this EoI should be notarized**.
* The original copies of substantiated documents must be available while requested by Evaluation Team in evaluation process.
* Add rows as needed.

**4(B). Specific Experience**

**Details of similar assignments undertaken in the previous seven years**

*(In case of joint venture of two or more firms to be filled separately for each constituent member)*

|  |  |
| --- | --- |
| Assignment name:Training name:  | Approx. value of the contract (in current NRs) |
| Country:Location within country: | Duration of assignment (months): |
| Name of Client: | Total No. of person-months of the assignment: |
| Address: | Approx. value of the services provided by your firm under the contract (in current NRs): |
| Start date (month/year):Completion date (month/year): | No. of professional person-months provided by the joint venture partners or the Sub-Consultants: |
| Name of joint venture partner or sub-Consultants, if any: | Narrative description of Project: |
| Description of actual services provided in the assignment:**Note: Provide highlight on similar services provided by the consultant as required by the EOI assignment.** |

Firm’s Name:

**4(C). Geographic Experience**

**Experience of working in similar geographic region or country**

*(In case of joint venture of two or more firms to be filled separately for each constituent member)*

|  |  |  |  |
| --- | --- | --- | --- |
| ***No***  | ***Name of the Project*** | ***Location******(District)*** | ***Execution Year and Duration*** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(Please insert more rows as necessary)

## Form 5: Capacity

**5(A). Financial Capacity**

*(In case of joint venture of two or more firms to be filled separately for each constituent member)*

|  |
| --- |
| **Average Turnover** **If time extension has been taken from IRD** |
| **Fiscal Year** | **Amount NRs** |
| **FY 2075/076** |  |
| **FY 2076/077** |  |
| **FY 2077/078** |  |
| **Three year’s Average** |  |

Or

|  |
| --- |
| **Average Turnover** **If Tax Clearance Certificate has been received for FY 2078/079** |
| **Fiscal Year** | **Amount NRs** |
| **FY 2076/077** |  |
| **FY 2077/078** |  |
| **FY 2078/079** |  |
| **Three year’s Average** |  |

 (Note: Supporting documents including Audit Report for Average Turnover should be submitted for the above.)

**5(B). Infrastructure/equipment related to the proposed assignment[[2]](#footnote-2)**

Please indicate the availability of infrastructure in the company’s head office.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Infrastructure/equipment Required** | **Requirements Description** |
| **SN** | **Description** | **Unit** | **Size** | **Remarks** |
| 1 | Office and Training Building |  |  |  |
| 2 | Class Rooms |  |  |  |
| 3 | Lab/Workshop |  |  |  |
| 4 | Store |  |  |  |
| 5 | Office Rooms |  |  |  |
| 6 | Toilet |  |  |  |
|  | Male |  |  |  |
|  | Female |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SN** | **Description** | **Specification** | **Unit** | **Number** | **Remarks** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

List of Available Tools, Equipment and Materials required for proposed each occupation:

* infrastructure/equipment are subject to verification.

(Please insert more rows as necessary)

**Format of Curriculum Vitae (CV) for Proposed Professional Staff**

Proposed Position:

Name of Consultant:

Name of Staff:

Profession:

Date of Birth:

Years with Consultant/Entity: Nationality:

Membership in Professional Societies:

Detailed Tasks Assigned:

**Key Qualifications:**

[*Give an outline of staff member’s experience and training most pertinent to tasks on assignment. Describe degree of responsibility held by staff member on relevant previous assignments and give dates and locations. Use about half a page.*]

**Education:**

[*Summarize college/university and other specialized education of staff member, giving names of schools, dates attended, and degrees obtained. Use about one quarter of a page*]

**Employment Record:**

[*Starting with present position, list in reverse order every employment held. List all positions held by staff member since graduation, giving dates, names of employing organizations, titles of positions held, and locations of assignments. For experience in last ten years, also give types of activities performed and client references, where appropriate. Use about two pages.*]

**Languages:**

[*For each language indicate proficiency: excellent, good, fair, or poor in speaking, reading, and writing.*]

**Certification:**

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

*[Signature of staff member and authorized representative of the consultant]* *Day/Month/Year*

Full name of staff member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full name of authorized representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Applications by joint ventures should provide on a separate sheet, relevant information for each party to the Application. [↑](#footnote-ref-1)
2. *Delete this table if infrastructure/equipment for the proposed assignment is not required.* [↑](#footnote-ref-2)