

## NOTICE OF REQUEST FOR PROPOSAL (RFP)

(First published on 15, September 2024)

### FOR THE IMPLEMENTATION OF TRAINING WITH OJT (LEVEL II WITH 1696 HOURS) PROGRAM

Enhanced Skills for Sustainable and Rewarding Employment (ENSSURE) Phase II is a bilateral initiative of the Government of Nepal (GoN) and the Government of Switzerland. ENSSURE II seeks to institutionalize and scale up work-based learnings, mainly the Dual VET apprenticeship, in the federal system. The overall objective of ENSSURE II is to help “Nepalese youths, women, and men, gain social and economic benefits from a federalized TVET system.”

ENSSURE II is implemented by 3 tiers of government at Federal, Provincial and Local level with technical assistance from Helvetas Nepal. Helvetas Nepal provides TA to federal, provincial, and local governments through Project Support Unit (PSU) at Federal and Provinces.

In this connection, under ENSSURE -II, Kohalpur Municipality, Banke invites request for proposals from interested and competent Training Providers having training facilities with adequate physical infrastructures and Human resources, to implement the Training with OJT (Level II with 1696 hours), program on **Professional Cook** for 20 youths as per the CTEVT’s curricula.

*Interested bidders can download bid documents from [www.kohalpurmun.gov.np](http://www.kohalpurmun.gov.np). Bidders can apply to more than one training but separate proposals should be submitted for each training package. The bid documents should be submitted in one sealed envelope containing 3 separate envelopes of the following documents:*

- i. Documents for eligibility,
- ii. Technical Proposal and
- iii. Financial Proposal.

The duly completed proposal should be submitted to the following address:

Kohalpur Municipality

Contact number : 9841836219

Mail : [info@kohalpurmun.gov.np](mailto:info@kohalpurmun.gov.np), [edu@kohalpurmun.gov.np](mailto:edu@kohalpurmun.gov.np)

Website: [www.kohalpurmun.gov.np](http://www.kohalpurmun.gov.np)

The consultants will be selected following the Quality and Cost Based Selection (QCBS) method. The minimum score to pass the technical proposal is 60. The weightage of the technical proposal and financial proposal will be 80% and 20% respectively. Any inquiries other than necessary clarifications on the Request for Proposal (RFP) will not be entertained and any type of solicitation will automatically disqualify the bidder from the selection process. Kohalpur Municipality reserves the right to accept or reject any or all proposals without stating any cause.

The deadline for the submission of the proposal is before 05:00 PM, 30, September 2024. *In case* the last day of submission falls on a public holiday, then the next working day and same time shall be considered as the last date.

### Eligibility Criteria

To be eligible in the selection process, the Training Institutes must fulfill the following eligibility criteria.

- a) Notarized copy of Firm's registration and updated in the office of the Company Registrar indicating at least three years standing of the firm/s;
- b) Notarized copy of VAT registration.
- c) Notarized copy of Valid CTEVT affiliation to conduct 1400-1696 hours training in a related occupation or Copy of Valid CTEVT affiliation to conduct the pre/diploma in a related occupation.
- d) Notarized copy of Tax clearance certificate for the last three fiscal (2078/79, 2079/80 & 2080/2081)
- e) Notarized copy of Audit report for the last three fiscal year (2078/79, 2079/80 & 2080/2081)
- f) At least NRs. 9 million turnovers of last three fiscal years (2078/079, 2079/080 & 2080/081)
- g) Self-Declaration made in writing by the training provider/s that it is not disqualified for taking part in the procurement proceedings, that it has no conflict of interest in the proposed procurement proceeding, and that it has not been punished for an offense relating to the concerned profession or business.

## **Standard Request for Proposal**

**For Implementation of Training with OJT Program  
ON  
Professional Cook (Level 2 with 1696 hrs.)**

**Procurement of Consulting Services National Competition Bidding**

**Project:** Enhanced Skills for Sustainable and Rewarding Employment (ENSSURE) Project-II

**Financing Agency:** Swiss Agency for Development and Cooperation (SDC)

**Issued by:**  
**Kohalpur Municipality**  
**Banke District**

**15, September 2024**

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## Abbreviations

CV	-	Curriculum Vitae
CTEVT	-	Council for Technical Education and Vocational Training
DO	-	Development Partner
EA	-	Executive Agency
ENSSURE	-	Enhanced Skills for Sustainable and Rewarding Employment
EOI	-	Expression of Interest
GON	-	Government of Nepal
OJT	-	On-the-job Training
NSTB	-	National Skill Testing Board
PAN	-	Permanent Account Number
PPA	-	Public Procurement Act
PPR	-	Public Procurement Regulation
RfP	-	Request for Proposal
TNA	-	Training Need Assessment
TOR	-	Terms of Reference
TOT	-	Training of Trainers
TSLC	-	Technical School Leaving Certificate
VAT	-	Value Added Tax
TPs	-	Training Providers

**Instructions to Bidders:**

1. Any unclear points regarding this proposal submission process can be discussed and agreed on the pre-bid meeting. The clarification from Palika shall be published in the Palika's website or will be informed to all the bidders using appropriate means of communication within 5 days of the meeting so held.
2. All copies (every page) of the evidence documents should be duly notarized.
3. The bidders are supposed to submit the documents mentioned as the Mandatory requirements only in the ToR with this proposal.
4. Request for proposal should be submitted by a sole firm. Sub-contracting, Joint Venture, and franchising shall not be allowed.
5. The Bidders are requested to submit the documents in an appropriate order, duly compiled with a perfect hard binding copy. The proposal formats shall be in a serial order from TECH – A to TECH – I, CVs, and other required documents. We strongly advise not to attach unnecessary documents.
6. The Bidders shall be responsible for the consequences of any submitted fraudulent documents.

## **Technical Proposal - Standard Forms**

- TECH A. TECHNICAL PROPOSAL SUBMISSION LETTER.**
- TECH B. CONSULTANT'S REFERENCES.**
- TECH C. SPECIFIC EXPERIENCE OF THE CONSULTANTS RELATED TO THE ASSIGNMENT**
- TECH D. AVAILABLE INFRASTRUCTURE AND EQUIPMENT (SUBJECT TO FIELD VERIFICATION)**
- TECH E. DESCRIPTION OF THE METHODOLOGY AND WORK PLAN TO PERFORM THE ASSIGNMENT.**
- TECH F. TEAM COMPOSITION AND TASK ASSIGNMENTS.**
- TECH G. FORMAT OF CURRICULUM VITAE (CV) FOR PROPOSED PROFESSIONAL STAFF.**
- TECH H. ACTIVITY (WORK) SCHEDULE.**
- TECH I. PROFESSIONAL PERSONNEL PLAN**

**TECH A : TECHNICAL PROPOSAL SUBMISSION LETTER**

Date: .....

..... **Municipality/ Rural Municipality/Enhanced Skills for Sustainable and Rewarding Employment (ENSSURE)-II**

**Subject: Submission of the Technical Proposal**

Dear Sir:

We, the undersigned, offer our services to implement 1696 hours Training with OJT program on Professional Cook in accordance with your Request for Proposal dated **15 September 2024** and our Proposal. We are hereby submitting our technical proposal sealed under a separate envelope to serve 20 trainees.

Our proposal is binding upon us and subject to the modifications resulting from contract negotiations. We hereby confirm that our proposal is in accordance with the Standard Formats provided in the Request for Proposal (RFP).

We understand you are not bound to accept any Proposal you receive.

Sincerely Yours,

Authorized Signature:

Name and Title of Signatory:

Name of Bidder:

Address:

Stamp of the Bidder:

## Eligibility Assessment Criteria for Bidder

To be eligible in the bidding process, the training provider along with its consortium must meet the following criteria. **Please submit the eligibility assessment documents separately according to the following order.**

S.N.	Particulars	The Documents to be Attached	Attached? (Yes or No)
1	Firm's registration and updated in the office of the Company Registrar indicating at least three years standing of the firm/s	Notary certified copy of company registration	
2	VAT registration	Notary certified copy of VAT registration.	
3	Valid CTEVT affiliation to conduct 1400-1696 hours training in related occupation with letter of renewal or Valid CTEVT affiliation to conduct the pre/diploma course in related occupation.	Notary certified copy of CTEVT affiliation letter	
4	Tax clearance certificate for the last three fiscal years (2078/079, 2079/080 & 2080/081) or Time extension letter of Inland Revenue Department in case of not taken tax clearance certificate.	Notary certified copy of tax clearance certificates of FY (2078/079, 2079/080 & 2080/081)	
5	Audit report of the last three fiscal year (2078/079, 2079/080 & 2080/081)	Notary certified copy of copy of audit report of FY (2078/079, 2079/080 & 2080/081)	
6	At least NRs. 9 million turnovers of last three fiscal years (2078/079, 2079/080 & 2080/081)		
7	Self-Declaration made in writing by the training provider/s that it is not disqualified for taking part in the procurement proceedings, that it has no conflict of interest in the proposed procurement proceeding and that it has not been punished for an offence relating to the concerned profession or business	Original declaration Letter in the Letter Head of the TPs	

**TECH B : BIDDER'S REFERENCES****B1. Background information****B1.1 General Information of Training Provider (TP)**

S.N.	Description			Remark
1	Name of the TP/Institute			
2	Address	District		
		Municipality/RM		
		Ward No.		
3	Contact Detail	Office Phone No.		
		Email Address		
4	Contact Person	Name		
		Designation		
		Mobile No.		
		Email address		

**B1.2 Legal Information**

1	Main Shareholders and Their Holding	Name	Shared Percentage	Remark
2	<b>Head of Organization</b>			
	Name			
	Home Address			
	Mobile			
	Email Address			
3	Company Registration Status	Registration Number		
		Registered Date		
4	CTEVT Affiliation (Related to the proposed training)	Affiliation No.		
		Date of Affiliation		
		Affiliated level and occupation/s		
		Validity Date		
5	VAT/PAN Registration	Registration No.		
		VAT No.		

**B1.3. Brief Information of the Organization** (Please provide brief information of the organization including, vision, mission, goal, areas of expertise, geographical experiences and Organizational Charts (Maximum 2 pages).

<b>Introduction</b>		
<b>Vision</b>		
<b>Mission</b>		
<b>Goal</b>		
<b>Areas of Expertise</b>	<b>Trade</b>	<b>Occupation</b>
<b>Main Geographical Regions of Experience</b>		
<b>Organizational Chart including the full name of the Board of Directors</b>		

Please provide information on the legally established branch offices, if applicable.

<b>Information</b>	<b>Branch 1</b>	<b>Branch 2</b>
District		
Municipality/RM		
Ward Number		
Office Telephone No.		
Contact Person's Name		
Contact Person's Designation		
Contact Person's Mobile Number		
Email		

***(Please add more in this table if you have more than 2 branches in operation.)***

**B1.4. Financial Information of Training Provider** (Please submit the copy of financial documents in ANNEX)

<b>Description</b>	<b>FY 2078/079</b>	<b>FY 2079/080</b>	<b>FY 2080/081</b>	<b>Total</b>	<b>Remark</b>
Annual turnover (NRs.) <i>(As per the audited financial statement)</i>					
Net profit (NRs.) <i>As per the audited financial statement)</i>					

**B2. Understanding of the objective and expected output/outcome of the assignment.**

**B3. Comments and suggestion on Terms of Reference.**

**TECH C : WORKING EXPERIENCES IN TRAINING PROGRAM**

**C1. General working experience in training program (e.g., L-1, L-2, L-3, 1400-1696 hours or pre/diploma etc.) imparted in last three fiscal years (2078/079, 2079/080 and 2080/081)**  
*(Please provide the information based on the record provided by NSTB only)*

S.N.	Occupations	Program (e.g., L-1, L2, L-3, 1400-1696 Hours, Pre/Diploma etc.)	Number of Trainees Trained	Number of Trainees Passed Skill test or exam	Employment rate (%)	Training Location (Please mention the name of Palika, District and Province)	In which Fiscal Year training was conducted?
1							
2							
3							
4							
5							

*(Please attach copies of experiences provided by NSTB only. Do not attach the copy of agreement)*

**C2. Specific training experience in same occupation (e.g., L-1, L-2, L-3, 1400-1696 hours or pre/diploma etc.) imparted in last three fiscal years (2078/079, 2079/080 and 2080/081)**  
*(Please provide the information based on the record provided by NSTB only)*

S.N.	Occupations	Program (e.g., L-1, L2, L-3, 1400-1696 Hours, Pre/Diploma etc.)	Number of Trainees Trained	Number of Trainees Passed Skill test or exam	Employment rate (%)	Training Location (Please mention the name of Palika, District and Province)	In which Fiscal Year training was conducted?
1							
2							
3							
4							
5							

*(Please attach copies of experiences provided by the NSTB only. Do not attach the copy of agreement)*

**TECH D : AVAILABLE INFRASTRUCTURE AND EQUIPMENT**

Availability of Infrastructure: Office Building, Classrooms, Practical Workshop/labs, Library, Hostels for male and female, Toilets for male and female, furniture's, Safety Equipment/Provisions etc.

**D1. Office space and training facilities**

S.N.	Particular	Description	Unit (Number)	Size	Remark
1					
2					
3					
4					
5					

**D2. Safety Equipment**

S.N.	Particular	Description	Unit (Number)	Size	Remark
1					
2					
3					
4					
5					

**D3. List of tools, equipment and training materials available**

*[Please mention the list of available teaching learning materials for those occupations in which you are intended to apply. You can add more rows where necessary.]*

SN	Description	Quantity (No. Pieces, etc.)	SN	Description	Quantity (No. Pieces, etc.)
1			6		
2			7		
3			8		
4			9		
5			10		

**D4. List of industries/companies accepting trainees for industry-based practices (OJT)**

*[Please mention the list of industries/companies who have accepted for providing industry-based practices in the proposed occupation. You can add more rows where necessary.]*

SN	Name of Company	Number of Trainees accepted	In-company trainer/s confirmed (yes/no)	MOU signed (yes/no)

**TECH E : DESCRIPTION OF THE METHODOLOGY AND WORK PLAN TO PERFORM THE ASSIGNMENT**

*(Please mention for both center-based training and industry-based training)*

**E1. Preparation methodology**

- Selection of industry and collaboration
- MoU sign with OJT providing industries
- Outreach strategy/social marketing
- Application collection and Orientation to applicants
- Selection of trainees

- Venue Management, Human resources management, Safety Measures/ Emergency Preparedness

**E2. Implementation methodology**

- Training implementation method (center-based and industry-based)
- Work plan and personnel schedule
- Management of center-based
- Allocation of trainees and management of industry-based training
- Monitoring and performance evaluation methodology (center-based and industry-based)

**E3. Post Implementation methodology**

- Skill test preparation and appear in NSTB skill test
- Job placement strategy
- Communication and reporting mechanism

**TECH F : TEAM COMPOSITION FOR PROPOSED ASSIGNMENT**

**3F1. Provide information on proposed staff for the program under this assignment.**

S. N.	Proposed Position	Name	Qualification	ToT /instructional skills	Years of Experience
<b>Key Experts:</b>					
1	Training Coordinator				
2	Instructor 1				
3	Instructor 2				
....	.....				
<b>Additional Human Resources:</b>					
1	Database Operator				
2	Placement and Monitoring Officer				

*(Please add row as per the requirements)*

**Note:**

CVs of the proposed staff, duly signed by the proposed professional staff and the authorized representative of the bidder must be attached for the evaluation. CV must be in the format given below in TECH G.

Please submit copies of the following certificates. If the same expert's CV is submitted by more than one bidder such a CV will not be evaluated in any bidder's favor.

1. Highest qualification certificate
2. TOT/ instructional skills/managerial skills certificates and
3. Evidence of relevant experiences and similar tasks performed; based on the submitted CV.

**TECH G : FORMATS OF CURRICULUM VITAE (CV) FOR PROPOSED PROFESSIONAL STAFF**

Proposed Position: \_\_\_\_\_

Name of Training Institute: \_\_\_\_\_

Name of Staff: \_\_\_\_\_

Phone /Mobile No. of Staff (Mandatory): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**Education:**

[Summarize the degrees obtained, college and university and year of education completion of a staff member.]

Qualification	Institute/School/College	Year of Completion

**Employment Record:**

[Starting with present relevant position, list in chronological order every employment held. List all dates and positions held, names of employing organizations and major tasks performed,]

Position and Duration	Employer	Major tasks performed

**Training:**

[Summarize relevant training (TOT or Management and Supervision) successfully completed by staff member, giving names of training institution and duration.]

Training	Institute	Duration and Date

**Certification:**

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

\_\_\_\_\_ Date:  
[Signature of staff member and authorized representative of the consultant][Day/Month/Year]

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

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

Stamp of the bidder provider: \_\_\_\_\_

**TECH H :      ACTIVITY (WORK) PLAN**

SN	Activity	<i>[1st, 2nd, etc. are months from the start of assignment. ]</i>														
		1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	13 <sup>th</sup>	14 <sup>th</sup>	15 <sup>th</sup>

Signature: \_\_\_\_\_

(Authorized representative)

Full Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

Cell no : \_\_\_\_\_

**TECH I : PROFESSIONAL PERSONNEL PLAN**

SN	Name	Position	Responsibility	<i>[1st, 2nd, etc. are months from the start of assignment. ]</i>														
				1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	13 <sup>TH</sup>	14 <sup>th</sup>	15 <sup>th</sup>

Signature: \_\_\_\_\_

(Authorized representative)

Full Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

Cell no : \_\_\_\_\_

## **Financial Proposal - Standard Forms**

**FIN A : FINANCIAL PROPOSAL SUBMISSION FORM**

**FIN B : SUMMARY OF COSTS**

**FIN C : DETAILED BREAKDOWN OF COST**

**FIN A : FINANCIAL PROPOSAL SUBMISSION LETTER**

Date: .....

Kohalpur Municipality / Enhanced Skills for sustainable and Rewarding Employment (ENSSURE)-II,  
Banke district, Nepal

**Subject: Submission of the Financial Proposal**

Dear Sir/Madam;

We, the undersigned, offer our services to implement 1696 hours Training with OJT program on Professional Cook in accordance with your Request for Proposal dated 15, September 2024 and our Proposal. Our attached Financial Proposal is for the sum of NRs.. ----- (Amount in words-----). to serve 20 trainees.

Our Financial Proposal shall be binding upon us subject to the modifications resulting from Contract negotiations, up to the expiration of the validity period of the Proposal, i.e., -----/-----/ 2024.

We understand you are not bound to accept any proposal you receive.

Sincerely Yours,

Authorized Signature:

Name and Title of Signatory:

Name of the Bidder:

Address:

Stamp of the bidder:

**FIN B : SUMMARY OF COST FOR .....[PROPOSED NO.]..... TRAINEES**

Costs	Amount(s)	Amount in Figure (Mandatory)
Sub-total Training Cost (A. 1)		
Value Added Tax (VAT) (A. 2)		
Total Training Cost Including VAT (A. 3)		
Total Amount of Financial Proposal (A.3+B.1)		

**FIN C : DETAILED BREAKDOWN OF COST**

**Financial Proposal for Training Courses with OJT**

**Name of Service Provider:**

**Address:**

**Occupation:** .....

Training Duration: 1696 hrs (10 months)

Proposed number of participants = 20

Occupation: .....(Training with OJT) Course						
<b>Duration: 1696 Hrs.</b>						
<b>Number of Participant: 20</b>						
S.N.	Particulars	Unit	Quantity	Rate (NPR)	Amount (NPR)	Remarks
<b>A.</b>	<b>Direct Training Cost</b>					
<b>1</b>	<b>Training Delivery Cost</b>					
1.1	Training Coordinator	Day				Center- based training costing for per day
1.2	Instructor (Officer Level)	Hour				Center- based training costing for theory and practical session
1.3	Assistant Instructor	Hour				Center- based training costing for practical hours only
1.4	Teaching Aide/Store Management	Hour				Center-based training costing for practical hours only
			<b>Sub total 1</b>			
<b>2</b>	<b>Teaching Materials Cost</b>		<b>20</b>			
2.1	Consumable materials	Trainee	20			
2.2	Non-consumable materials	Trainee	20			
			<b>Sub total 2</b>			
<b>3</b>	<b>Training Supports Cost(Miscellaneous)</b>					
3.1	Training announcement and selection	LS	1			
3.2	Office management (Monitoring, utilities, supplies, communication, transportation, supporting staff etc) cost	Month	10			
3.3	Agreement/ OJT placement/ management and / or coordination with industries and associations	LS	1			
			<b>Sub total 3</b>			
	<b>Total direct cost for 20 trainees without VAT =A (1+2+3)</b>					
	<b>Per trainee direct cost (without VAT) = A/20</b>					
	<b>VAT (13 %)</b>					

	<b>Total direct cost for 20 trainees (with VAT)</b>					Applicable only for private training providers
	<b>Per trainee direct cost (with VAT)</b>					
	<b>Total per unit cost</b>	<b>Unit</b>	<b>Quantity</b>	<b>Rate (NPR)</b>	<b>Amount (NPR)</b>	
<b>B</b>	<b>Indirect Cost (Reimbursable Cost)</b>					
1	Transportation allowance for trainee-Trainee Day (20 trainees *260 days)	Trainee day	5200			
2	Material cost for skill test	Trainee	20			
3	Group personal accidental Insurance (Min. 7 Lakhs/person)	Trainee	20			
	<b>Total indirect cost for 20 trainees =B</b>					
	<b>Per trainee indirect cost = B/20</b>					
	<b>Total cost (Direct and Indirect) without VAT = C</b>					
	<b>Per trainee cost (Direct and indirect)-without VAT</b>					

**Note:**

1. Local Government will recommend the skill test to NSTB based on the provided list of technical school/TP
2. The cost of the skill test will be paid directly to the NSTB by the local government.

Authorized Signature

Date:

Office Stamp