**Qualifications for Implementation grant management under 3ie’s Swashakt evidence programme**

**A.** **Application cover letter**

Please include a cover note stating why the proposed implementation grant management team is qualified to undertake the tasks laid out under the ‘Scope of work’ section of this RFQ. This cover letter is expected to demonstrate the team’s:

1. Knowledge of women’s collective enterprises in India and the opportunities and challenges of these;
2. Knowledge of the policies and schemes in India that are relevant for the promotion of small- and medium-sized enterprises;
3. Experience in monitoring of programme implementation against relevant performance indicators; and
4. Experience in the development of M&E systems for programmes

**B. Organisational Information**

By submitting this qualification for Swashakt evidence programme implementation grant management, we certify that we are legally eligible to receive grants from organisations in other countries. We also certify that the individual authorised to sign the grant agreement documents has reviewed 3ie’s grant agreement documents available on the 3ie website and confirmed that the applicant organisation can agree to the terms of the documents.

Please check here in acknowledgement of eligibility and legal authorisation*:*

1. The complete legal name of applicant organisation:
2. Is the applicant organisation a 3ie associate member or member? (Yes/No):
3. Is the applicant organisation able to sign a 3ie grant agreement? (Yes/No):
4. The legal form of the applicant organisation:
5. The country in which applicant organisation is legally registered:
6. If registered in India, please provide the FCRA registration details:
7. Full postal address of applicant organisation:
8. Website address of applicant organisation (if applicable):
9. Contact person for this application (only one, please):
   1. Name:
   2. Title:
   3. Phone number:
   4. Email address
10. The individual authorised to sign the grant agreement documents:
    1. Name:
    2. Title:
    3. Phone number:
    4. Email address:

**C. Team information**

Kindly fill the table below stating the proposed roles of the different team members in the implementation grant management team.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.no.** | **Name** | **Role in the team** | **Core competency** | **Relevant experience in bullet points** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

**D. Curriculum vitae**

For each of the team members mentioned above, provide a CV below. [Applicants to provide only information relevant to the grant and CVs should not exceed three pages.]

**E. Budget information**

Refer to the table below and the enclosed 3ie budget template. Complete the budget template according to the guidelines provided in the workbook, while paying careful attention to the 3ie policies relating to [direct](https://www.3ieimpact.org/sites/default/files/2019-01/3ie-direct-cost-policy-IE.pdf) and [indirect](https://www.3ieimpact.org/sites/default/files/2019-01/3ie-indirect-cost-guidelines.pdf) costs.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Summary of resources required for project | | | | |
| Enter the amounts from the Financial Summary worksheet of the budget template in the table below. | | | | |
| Fund Heading | **Year 1** | **Year 2** | **Year 3** | **Total** |
| Personnel |  |  |  |  |
| Consultancy |  |  |  |  |
| Travel |  |  |  |  |
| Additional Costs |  |  |  |  |
| Office Expenses |  |  |  |  |
| Grantee indirect cost |  |  |  |  |
|  |  |  |  |  |
| Total |  |  |  |  |