# ANNEX G: EXPRESSION OF INTEREST (EOI)

# Women’s Technical Exchange Programme

# Category A – Trainer

# Project Title:

# Part 1: Organizational profile

|  |
| --- |
| 1. Name of Applicant: |
|  |
| 1. Type of Organization: |
|  |
| 1. Address: |
|  |
| 1. Contact Person: |
|  |
| 1. Details of ownership structure and directors /key management: |
|  |
| 1. Tel :   Mobile :  E-mail:  Website : |
|  |
| 1. Registration Details (Place, Year & Act of Registration): |
|  |
| 1. Organization Vision and Objectives: |
|  |
| 1. Geographical Areas of Operation: |
|  |
| 1. Years of functioning and previous experience |
|  |
| 1. Organizational Infrastructure (Staff strength, Facilities etc.) |

12. Details of Major relevant Projects in the Past 3 years

*Indicate up to 3 reference projects that are relevant to this application.*

|  |  |  |  |
| --- | --- | --- | --- |
| Project Name |  | | |
| Country |  | | Project location within Country |
| Participation |  | As Lead firm  As associate firm | |
| Services provided |  | | |
| Source of Financing |  | | |
| Start Date: |  | | |
| Completion Date: |  | | |
| Name of Associate Firms (if any) |  | | |
| Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed | | | |
| Description of the Project (less than 500 words) | | | |
| Description of the Actual Services Provided by your Firm (less than 300 words) | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Project Name |  | | |
| Country |  | | Project location within Country |
| Participation |  | As Lead firm  As associate firm | |
| Services provided |  | | |
| Source of Financing |  | | |
| Start Date: |  | | |
| Completion Date: |  | | |
| Name of Associate Firms (if any) |  | | |
| Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed | | | |
| Description of the Project (less than 500 words) | | | |
| Description of the Actual Services Provided by your Firm (less than 300 words) | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Project Name |  | | |
| Country |  | | Project location within Country |
| Participation |  | As Lead firm  As associate firm | |
| Services provided |  | | |
| Source of Financing |  | | |
| Start Date: |  | | |
| Completion Date: |  | | |
| Name of Associate Firms (if any) |  | | |
| Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed | | | |
| Description of the Project (less than 500 words) | | | |
| Description of the Actual Services Provided by your Firm (less than 300 words) | | | |

# Part 2: Project Information

|  |  |
| --- | --- |
| * 1. Thematic area that training will be conducted:  |  | | --- | | Business Development  Technology fabrication/application | |
| * 1. Provide details of the training (including the methodology, target groups and expected qualifications):  |  | | --- | |  | |
| * 1. Training location/working language(s) |
| |  | | --- | |  | |
| * 1. Learning Objectives and Outcomes  |  | | --- | |  |  * 1. Expected Learning Outcomes  |  | | --- | |  |  * 1. Main Project Activities  |  |  |  | | --- | --- | --- | | **Results** | **Main activities (extend as needed)** | **Expected Duration** | | 1.1 |  |  | | 1.2 |  |  | | 2.1 |  |  | | 3.1 |  |  | | 4.1 |  |  | | 5.1 |  |  | | 6.1 |  |  | | |
|  | |

* 1. Capacity and Experience of Applicant and Partners

*Provide a brief description of the capacity and experience of the Lead Applicant and Partner(s)( If the project is will be executed in partnership with another firm specify the services which will provided)*

Lead Applicant (specify name):

|  |
| --- |
|  |

Partner 1 - (please specify name):

|  |
| --- |
|  |

Partner 2 - (please specify name):

|  |
| --- |
|  |

Partner 3 - (please specify name):

|  |
| --- |
|  |

* 1. Experience / expertise of project team:

*Highlight experience / expertise of relevance to the proposed project*

|  |  |  |
| --- | --- | --- |
| **Project team** | **Name of Expert(s)** | **Relevant Experience and Education** |
| **Lead applicant** |  |  |
| **Partner 1** |  |  |
| **Partner 2** |  |  |
| **Partner 3** |  |  |
| **Partner 4** |  |  |

*Attach CVs*

CERTIFICATION BY LEAD APPLICANT

|  |  |
| --- | --- |
| **Signature:** |  |
| **Name:** |  |
| **Position in organization:** |  |
| **Date and Location:** |  |

**Organizational Stamp of Lead Applicant:**