

**Expressions of Interest from NGOs/CBOs and networks of
people living with HIV/AIDS (PLHAs).**

**ADVERTISEMENT FOR INVITING APPLICATIONS FROM NGOs/ CBOs FOR
EMPANELMENT:**

The Government of India has received a Credit (Credit- 4299-IN) from the International Development Association (IDA) and a grant from the Department for International Development (DFID), U K in various currencies towards the cost of the Third National HIV/AIDS Control Project and it is intended that a part of the proceeds of this credit/ grant will be applied to eligible payments under the contract for which this invitation for consultancy is issued. **The project is an intervention with a goal of reducing the burden of HIV/AIDS cases in the country. The components of the project are prevention, care and support and treatment, programme management and strategic information management with one of its sub-components being targeted interventions for high risk groups, as well as utilizing civil society organizations for providing access of vulnerable populations to various HIV/AIDS interventions.** It is proposed that applications would be invited from interested civil society organizations in the State of Tripura for empanelling themselves to (a) implement HIV/AIDS targeted interventions with highly vulnerable population groups (b) work in providing access to HIV/AIDS interventions like care & support, People living with HIV/AIDS and other vulnerable groups.

CBOs/ NGOs that are registered societies / trusts and active in community work are eligible to apply. Applications in the specified format, which is available in the following web site or would be mailed on request, would need to be submitted on or before **18th November, 2007.**

Letters of interest with accompanying materials (formats are available at the web-site given below) seeking empanelment should be submitted to the:

Project Director/NGO Coordinator
Tripura State AIDS Control Society

Akhaura Road (Opposite of I.G.M Hospital & Adjacent to Red Cross Bhawan),
Agartala, Tripura West (Address of SACS).

e-mail: **dr.keshab @ rediffmail.com**

www.tripura .nic.in (web-site) and www.tripurainfo.com

Please note that this is not a request for proposals.

Yours faithfully,

(Dr. K. Chakraborty)
Project Director,
Tripura State AIDS Control Society.
Agartala, Tripura.

EMPANELMENT DATA FORM FOR NEW NGOs.

Section A: Basic Information

1. Name of the Organization : _____
2. Postal Address : _____
- PIN: _____ District: _____
3. Telephone : Telex Fax E-mail
4. Legal status : () Society () Company () Others (specify)
5. Registration Details : Registered on _____ (Date)
- By _____
6. Contact person : _____
- Designation : _____

Section B: Organizational Background

7. Assets / Infrastructure of the organization
- Category Worth in rupees
- (eg. Land, building)
- 8.a. Please provide details, regarding the annual budget of your organization.

Year	Source	Amount
2006-07		
2005-06		

2004-05		
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8.b. : Whether blacklisted by CAPART or any other government organization in the past? If yes, provide details:

Section C: Current Programmes being run by the organization.

9. Geographical location of Work – List Village, Panchayat, Block, Taluk/Sub-Division, District (Each location should be separately specified)
10. Population with which they are presently working:
 - () Rural / Urban :
 - () Socio-economic group :
 - () Occupational group :
 - () Sex groups :
 - () Students/Educational Institution:
 - () Youth :
 - () Women groups :
 - () Others :
11. Please provide basis information on the key projects carry out by your organization since the last 3 years (5 lines for each subject- attach separately).
 - Community served
 - Objective
 - Strategies
 - Main outcomes

- Evaluation methods employed
- Evaluation results

12. A brief write up on the programmes the organization currently runs

(No more than three pages)

Section D - Documentation Required

13. Copies of the following documents need to be provided

- Society Registrations Certificate and memorandum of Association & Articles along with the latest filled return/ trust Deed
- Activity Report/ annual report of the organization for the last three years
- Annual audit report of the organization for the last 3 years.
- Income Tax Registration and Exemption Certificate if any
- FCRA Registration Certificate if any
- List of Board / Governing body members with Contact details and occupation

14. Name of the person who filled this form:

Qualification and experience:

Designation:

Address: