

REQUEST FOR EXPRESSION OF INTEREST

EOI Response Form No. [YEM23EOI07]

A. Company / Organization's competencies/ capacities			
	List of WFP requirements/evaluation criteria	Yes	Comments
1	Active presence in all the governorates of Yemen including IRG and SBA areas	<input type="checkbox"/>	
2	[Organization's flexibility, agility, and ability to deploy at short notice]	<input type="checkbox"/>	
3	[Gender sensitivity "Female and Male field staff"]	<input type="checkbox"/>	
4	Experience in Database management systems and availability of data collection tools.	<input type="checkbox"/>	
5	[Field staff are well trained to undertake data collection and deal with beneficiaries, partners and authorities in a mutually respectful manner as well as reinforcing each other with understanding of context and relevance of reported cases]	<input type="checkbox"/>	
6	At least 5 Years proven experience in the Yemeni market in conducting field monitoring or Food security data collection exercises.	<input type="checkbox"/>	
7	Previous work history, Reference for Previous work experience (projects with UN agencies or INGOs).	<input type="checkbox"/>	
8	Contact information for their previous clients as references	<input type="checkbox"/>	
9	Any relevant certifications or qualifications Supplier have	<input type="checkbox"/>	
10	An explanation of their quality control processes and procedures	<input type="checkbox"/>	
11	A detailed description of their technical expertise and experience in the fieldwork or data collection	<input type="checkbox"/>	
12	Sample of issued reports.	<input type="checkbox"/>	
13	Organizational structure, staffing and personal qualification, Organigram, CVs of senior staff	<input type="checkbox"/>	
14	Areas accessed by supplier, branches and office's location.	<input type="checkbox"/>	
15	If the supplier has any Partnerships with other companies or donors	<input type="checkbox"/>	
16	The supplier should provide access to their facilities and personnel for evaluation if requested by WFP	<input type="checkbox"/>	
17	Audited Financial Records and Capacity	<input type="checkbox"/>	
18	Risk assessment and mitigation plan	<input type="checkbox"/>	



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ANNEX 1. SUPPLIER INFORMATION FORM.

A. Company / Organization's Background Information			
1	Legal Name of Company/Organization:		
2	Full address:		
3	E-mail address:	Website address:	
4	Telephone:	Fax:	
5	Contact person, title:	Tel./E-mail of contact person:	
6	Registration with UNGM	Yes <input type="checkbox"/> No <input type="checkbox"/>	UNGM No.
7	Type of Business	Corporate/Limited	Partnership Other (specify)
8	Goods / Services:		
9	Company/Organization Business Registration Number:	6	Date of Registration:
10	Additional company/organization background information: [If applicable, insert not more than 100 words]		



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ANNEX 2. SUPPLIER FINANCIAL STATUS

B. Company / Organization's Financial Status	
Item	Value USD
Gross Turnover [Insert year]	
Gross Turnover [Insert year]	
Gross Turnover [Insert year]	
<i>Maximum contract value in relation to which your Company can be engaged:</i>	
USD 0 – 30,000	<input type="checkbox"/>
USD 30,000 – 100,000	<input type="checkbox"/>
USD 100,000 – 500,000	<input type="checkbox"/>
above USD 500,000	<input type="checkbox"/>
Maximum "Bank Guarantee" amount available to the Company/Organization	
Last two years audited accounts or alternative assessed within WFP's discretion are attached to prove the information stated above	<input type="checkbox"/>



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ANNEX 3. SUPPLIER RELEVANT EXPERIENCE

List at least 4 contracts in the last two years relevant to the supply of [Third party monitoring and verification Consultancy Services.].

C. Company / Organization's Financial Status				
Commenced (Month / Year)	Completed (Month / Year)	Type of Contract	Total Value (USD)	Client

D. Signatory	
Name of Company/Organization:	
Name:	Title:
Signature:	Date:

Provide CVs of senior staff (no more than three) [if applicable].

Company/Organization Stamp