**Annex III**

**Individual’s Information Sheets**

**“Support Coordination, Implementation, Monitoring and Vaccination Supplies Stock Management of COVID-19 Vaccine Distribution Plan”.**

 **(Please type)**

|  |
| --- |
| **General Information:**  |
| **Full name of individual:****Home address:****Telephone no.:****Fax no.:****E-mail address:*****Please attach your CV/resume.*** |
|  |
| **References: Please provide the full names and contact details of at least two people (not related to you) or organizations/companies with whom/which you have had previous work experience. Please note that if selected, these referees will be contacted for the purpose of reference checking.** |
| **1) Full name of referee:**  **Position/occupation:** **Telephone no.:** **E-mail address:** |
| **2) Full name of referee:**  **Position/occupation:** **Telephone no.:** **E-mail address:** |
| **3) Full name of referee:**  **Position/occupation:** **Telephone no.:** **E-mail address:** |

|  |
| --- |
| **Please list your similar previous activities (at least one case) with description of services provided by you.** |
| **1)** **2)****3)** |
| **Please write a summary of your educational background and your experience in below areas:** * Write about your University Degree/s:
* Write about your experience and skills in below areas:
	+ Professional experience in the field of software development, especially in the field of health care information systems and alike using latest well-known programming technologies Expertise in the treatment and recovery of drug use disorders.
	+ Experience in software development projects in the past 5 years
	+ Experience in training modules or guidance note or any other training materials/demos on developed software.
* Your knowledge of English (reading, writing and speaking in scientific/academic), please rate yourself.

No proficiencyElementary proficiencyLimited working proficiencyProfessional working proficiencyFull professional proficiency |

|  |
| --- |
| **Letter of interest: Please write (or attach), in no more than one page, about your motivation and interest in this activity and its relevance to your qualifications and previous work experience as well as why you consider yourself suitable for the work and a brief methodology on how you will approach & conduct the work.** |
|  |

|  |
| --- |
| **Please explain your methodology and approach for carrying out the activities and obtaining the expected output** |
|  |

|  |
| --- |
| **Please explain your understanding of the expected challenges and problems in implementation of this work and explain your approach to address and resolve them.** |
|  |
| **Please develop an action plan with steps and timeframe for activities to be conducted by you including coordination with organizations required for implementation of the work**  |
| Example:

|  |  |  |  |
| --- | --- | --- | --- |
| Steps | Involved entities(if applicable) | Timeframe | Responsible entity/individual(if applicable) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 |

|  |
| --- |
| **Attachments:** |
| ***Please attach following documents:**** CV
* Any other relevant documents including copy of contracts, publications, etc**.**

***Other explanations:*****Name and signature of the individual****Name:** **Signature:****Date**: |

**Annex IV**

**Financial Proposal**

The offeror is asked to provide a Financial Proposal with indicating the daily fee for the required duration to accomplish the deliverables defined in the Terms of Reference.

**Breakdown of Cost by Components:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of Output/Deliverables** | **Required working Days** | **Unit Cost (IRR)** | **Amount****(IRR)** |
| Pilot version of the software approved by the User Acceptance testing body (CDC Focal Point) along with the pre-final report on the development of this Version. |  |  |  |
| Final version of the software validated and approved by CDC and the final report along with full software package to be delivered to CDC Focal Point as project’s digital asset |  |  |  |
| Documents of all guidance notes, instructions and training materials. |  |  |  |
| Report of TOT training sessions for CDC experts and the facilitation of the webinar to train the UMS staff |  |  |  |
| 1st report on after sale services after the installation and operationalization of the platform |  |  |  |
| 2nd report on after sale services after the installation and operationalization of the platform |  |  |  |
| 3rd report on after sale services after the installation and operationalization of the platform |  |  |  |
| Final report on after sale services after the installation and operationalization of the platform |  |  |  |
| Total all-inclusive amount |  |

Signature:

Name: Title: Date:

**Important Notes:**

* The requested expected no. of days for each deliverable is purely for procurement justification purposes and will not affect the payment terms of the contract which is lump sum (deliverable based)
* The offered and agreed amount of each deliverable will not be subject to change during the lifetime of the contract.
* The payments will be made based on the completion of each deliverable upon certification by UNDP that the deliverables have been satisfactorily received.
* Based on UNDP rules and regulations, the national consultants should quote their financial proposal in local currency (IRR) and accordingly, the contract and the payments will be in IRR.
* In no circumstances, the contract currency will be subject to change. Therefore, the hard currency fluctuations will not have any effect on the contract.

**Annex V**

**OFFEROR’S LETTER TO UNDP**

**CONFIRMING INTEREST AND AVAILABILITY**

**FOR THE INDIVIDUAL CONTRACTOR (IC) ASSIGNMENT**

Date

Nazli Alavi

United Nations Development Programme

No.8, Shahrzad Blvd., Darrous, Tehran, 1948773911, Iran

Dear Sir/Madam:

I hereby declare that:

1. I have read, understood and hereby accept the Terms of Reference describing the duties and responsibilities of [*indicate title of assignment*] under the [*state project title*];
2. I have also read, understood and hereby accept UNDP’s General Conditions of Contract for the Services of the Individual Contractors;
3. I hereby propose my services and I confirm my interest in performing the assignment through the submission of my CV which I have duly signed and attached hereto as Annex 1;
4. In compliance with the requirements of the Terms of Reference, I hereby confirm that I am available for the entire duration of the assignment, and I shall perform the services in the manner described in my proposed approach/methodology which I have attached hereto as Annex 3 [delete this item if the TOR does not require submission of this document];
5. I hereby propose to complete the services based on the following payment rate: *[please check the box corresponding to the preferred option]:*



 An all-inclusive daily fee of [*state amount in words and in numbers indicating currency]*

 A total lump sum of [*state amount in words and in numbers, indicating exact currency]*, payable in the manner described in the Terms of Reference.

1. For your evaluation, the breakdown of the abovementioned all-inclusive amount is attached hereto as Annex 2;
2. I recognize that the payment of the abovementioned amounts due to me shall be based on my delivery of outputs within the timeframe specified in the TOR, which shall be subject to UNDP's review, acceptance and payment certification procedures;
3. This offer shall remain valid for a total period of \_\_\_\_\_\_\_\_\_\_\_ days [*minimum of 90 days*] after the submission deadline;
4. I confirm that I have no first degree relative (mother, father, son, daughter, spouse/partner, brother or sister) currently employed with any UN agency or office *[disclose the name of the relative, the UN office employing the relative, and the relationship if, any such relationship exists];*
5. If I am selected for this assignment, I shall *[please check the appropriate box]:*



Sign an Individual Contract with UNDP;

Request my employer *[state name of company/organization/institution]* to sign with UNDP a Reimbursable Loan Agreement (RLA), for and on my behalf. The contact person and details of my employer for this purpose are as follows:

1. I hereby confirm that *[check all that applies]*:



At the time of this submission, I have no active Individual Contract or any form of engagement with any Business Unit of UNDP;

I am currently engaged with UNDP and/or other entities for the following work:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assignment** | **Contract Type** | **UNDP Business Unit / Name of Institution/Company** | **Contract Duration** | **Contract Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |



I am also anticipating conclusion of the following work from UNDP and/or other entities for which I have submitted a proposal:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assignment** | **Contract Type** | **UNDP Business Unit / Name of Institution/Company** | **Contract Duration** | **Contract Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. I fully understand and recognize that UNDP is not bound to accept this proposal, and I also understand and accept that I shall bear all costs associated with its preparation and submission and that UNDP will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the selection process.
2. ***If you are a former staff member of the United Nations recently separated, please add this section to your letter:*** I hereby confirm that I have complied with the minimum break in service required before I can be eligible for an Individual Contract.
3. I also fully understand that, if I am engaged as an Individual Contractor, I have no expectations nor entitlements whatsoever to be re-instated or re-employed as a staff member.
4. Are any of your relatives employed by UNDP, any other UN organization or any other public international organization?

YES  NO If the answer is "yes", give the following information:

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Name of International Organization** |
|  |  |  |
|  |  |  |
|  |  |  |

1. Do you have any objections to our making enquiries of your present employer?

 YES  NO 

1. Are you now, or have you ever been a permanent civil servant in your government’s employ?

 YES  NO  If answer is "yes", WHEN?

1. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.

|  |  |  |
| --- | --- | --- |
| **Full Name** | **Full Address** | **Business or Occupation** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Have you been arrested, indicted, or summoned into court as a defendant in a criminal proceeding, or convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)?

 YES  NO  If "yes", give full particulars of each case in an attached statement.

FULL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME TEL NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CELL PHONE: , \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NB. You will be requested to supply documentary evidence which support the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of UNDP.