# **Application Forms**

Form 3A: Application Submission Form

Form 3B: CV of the Applicant

Form 3C: Remuneration and Reimbursable

### Form 3A. Application Submission

[Date: dd/mm/yy]

To: The Project Director Smallholder Agricultural Competitiveness Project (SACP) Sech Bhaban (5th Floor), 22 Manik Mia Avenue, Sher-e-Bangla Nagar, Dhaka-1207

#### Dear Sir:

I am hereby submitting my Application to provide the consulting services for [Insert title of assignment] in strict accordance with your Request for Expression of Interest (EOI) dated [dd/mm/yy].

I declare that I was not associated, not have been associated in the past, directly or indirectly, with a consultant or any other entity that has prepared the design, specifications and others documents in accordance with conflict of interest (Clause 5 of SRFA).

I further declare that I have not been declared ineligible by the Government of Bangladesh on charges of engaging in corrupt, fraudulent, collusive or coercive practices in accordance with clause 4 of SRFA.

I undertake, if I am selected, to commence the consulting Services for the assignment [Insert title of assignment] not later than 15 days (indicated in Clause 12.1) after negotiation of contract.

I understand that you are not bound to accept any Application that you may receive.

I remain,

Yours sincerely,

Signature Name Address: e-mail Mobile :

Attachment:

1.

2.

3.

4.

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## Form 3B. Curriculum Vitae (CV) of the Applicant

(Plase provide 2 copies of photographs along with CV)

1	PROPOSED POSITION FOR (SACP):	[From the Terms of Reference, state the position for which the Consultant will be engaged (i.e., name of position)].
2	NAME OF PERSON	[state full name]
	Permanent Address	
	Mailing Address	
	Telephone No.	
	Mobile No.	
	E-mail	
3	DATE OF BIRTH :	[ dd/mm/yy]
4	NATIONALITY :	Bangladeshi
5	MEMBERSHIP IN PROFESSIONAL SOCIETIES	[state rank and name of society and year of attaining that rank].
6. E	DUCATIONAL QUALIFICATION	

	Name of E	Degr	ee:		Ur	niversity	/Board			Year of passing	Class obtiained	
7	TRAINING (Relevant to p [Indicate sign: proposed task	ifica	nt training si	nce	degrees ι	ınder El	DUCATIOI	V we	ere obtai	ined, which	is pertinent to	the
	Name Training	of	Duration training	of	Institut where training held		Country	,	From	То	Total month	ıs
3	LANGUAGES PROFICIENC (Indicate poor	Υ			ellent)	<u>Langua</u>	age	Spe	eaking	Reading	Writing	
						e.g. Er	nglish	Flu	ent	Excellent	Excellent	
9	COUNTRIES	OF	WORK EXPI	ERIE	ENCE							

#### 10 A. EMPLOYMENT RECORD

(GOB organizations)

[starting with latest position list in reverse order [every employment held and state the start and end dates of each employment]

[The Applicant should clearly distinguish whether as an "employee" of the firm/project/organization or as a "Consultant" or "Advisor" of the firm].

[The Applicant should clearly indicate the Position held and give a brief description of the duties in which the Applicant was involved].

EMPLOYER 1 (name of employer with address)

From: [e.g. January 1999] To: [e.g. December 2001

(i) Position(s) held in parent organization

(name of positions)

(ii) Additional position held in donor funded/development projects

(name of positions)

- (iii) Assignment performed in relevance to experience and scope of work of proposed position in parent organization (in 5-7 bullet points)
- (iV) Assignment performed in relevance to experience and scope of work of proposed position in donor funded/development projects (in 5-7 bullet points)

EMPLOYER 2 (etc.) (name of employerwith address)

(i) Position(s) held in parent organization

(name of positions)

(ii) Additional position(s) in donor funded/development projects

(name of positions)

From: [e.g. January 1999] To: [e.g. December 2001

- (iii) Assignment performed in relevance to experience and scope of work of proposed position in parent organization (in 5-7 bullet points)
- (iV) Assignment performed in relevance to experience and scope of work of proposed position in donor funded/development projects (in 5-7 bulletpoints)

B. EMPLOYMENT RECORD (Donor funded/development projects) (Full time employment)

		OYER 1 funded/development project) me employment)							
	Name o	of project:							
	Donor a	agency:							
	Name o	of parent organization with address)							
	(i)	Position held							
		(name of positions	Fron	n: <i>[e c</i>	ı. January	19991	To: [e.g. D	ecember 2	2001
	(ii)	Assignment performed in relevance to experience and scope of work of proposed position (in 5-7 bullet points)	1101	<sub>[</sub> O.9	. ourraury	1000]	10. <sub>[</sub> 0.g. D		
	Donor t	OYER 2 (etc.) funded/development project) me employment)							
	Name o	of project:							
	Donor a	agency:							
	Name o	of parent organization with address)							
	(iii)	Position held	Fron	n::[e.	g. Januar	у	то:: [e.g. l	December	2001
		(name of position)	1999						
	(iv)	Assignment performed in relevance to experience and scope of work of proposed position (in 5-7 bullet points)							
ILLU		NDERTAKEN THAT BEST ES THE CAPABILITY TO HANDLE TI NT	HIS	perf	ormed and	training	et a descrip you particip nent, Use a	pated mos	t pertinent
12		JTER LITERACY AND SKILL k marks)			Poor	Good	Very Good	Excell ent	

	MS Word			
	Excell			
	Power Point			
13 LIST OF PUBLICATIONS				
14. REFERENCES				

#### **CERTIFICATION**

[Do not amend this Certification].

I, the undersigned, certify that (i) I was not a former employee of the Client immediately before the submission of this proposal, and (ii) to the best of my knowledge and belief, this CV correctly describes myself, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal, if engaged.

Signature		
Print name		
Date of Signing		
dd / mm / yyyy		

### Form 3C. Indicative Remuneration & Expenses

The Consultant should provide an indication of the remuneration as per the format shown below. This will not be used for evaluation of the Consultant's Application but solely for the purposes of Application Negotiations to be held.

#### (1) Remuneration

Rate∗ (per month)	Staff Time (No. month)	Total (Tk)

Note: A month consists of 30 calender days.

# (2) <u>Reimbursable</u> (As per DPP provision)

	Rate per unit	Total unit	Total Amount (Tk)
(a) Per Diem Allowance			
(b) Air Travel Costs			
(c) Other Travel Costs (state mode of travel)			
(d) Communication charges			
(e) Reproduction of Reports			
(f) Other Expenses (to be listed)			
Sub-total			

CONTRACT CEILING (1) + (2)	
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