Section III: Returnable Bidding Forms

**eSourcing reference**: RFP/2020/15140

Note to Offerors: The following returnable forms are part of this RFP and must be completed and returned by offerors as part of their Proposal. Instructions to complete each Form are highlighted in blue in each Form. Please complete the Returnable Bidding Forms as instructed and return them as part of your proposal by uploading them against their specific Document Checklist in the UNOPS eSourcing system. Please ensure that the financial information in your proposal is uploaded in the financial envelope checklist under the Financial Offer Details tab of the eSourcing system.

This Section comprises the following Returnable Bidding Forms:

* Form A: Joint Venture Partner Information Form
* Form B: Proposal Submission Form
* Form C: Financial Proposal Form
* Form D: Technical Proposal Form
* Form E: Format for Resume of Proposed Key Personnel
* Form F: No Adverse Action Confirmation Form
* From G: Previous experience form

Form A: Joint Venture Partner Information Form

[The Offeror shall fill in this Form in accordance with the instructions indicated below]

RFP reference no: RFP/2020/15140

Name of Offeror: [insert name of Offeror]

Date: [insert submission date]

To be completed and returned with your Proposal if the Proposal is submitted as a Joint Venture/Consortium/Association.

|  |  |
| --- | --- |
| **JV / Consortium/ Association Information** | |
| **Name** | [complete] |
| **Names of each partner and contact information**  (address, telephone numbers, fax numbers, e-mail address) | [complete] |
| **Name of leading** partner (with authority to bind the JV, Consortium, Association during the RFP process and, in the event a Contract is awarded, during contract execution) | [complete] |
| **Proposed proportion of responsibilities between partners (in %) with indication of the type of the services to be performed by each** | [complete] |

**Signatures of all partners of the JV:**

We hereby confirm that if the contract is awarded, all parties of the Joint Venture/Consortium/Association shall be jointly and severally liable to UNOPS for the fulfillment of the provisions of the Contract.

Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form B: Proposal Submission Form

Offerors are requested to complete this form, sign it and return it as part of their Proposal submission. The Offeror shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Date: [Insert submission date]

**Subject: Proposal for the supply of the Learning Management System (LMS) for GELI in Geneva, Switzerland, RFP Case No. RFP/2020/15140,** dated **[insert date]**

We, the undersigned, declare that:

* 1. We have examined and have no reservations to the Bidding documents, including amendments No.: [Insert the number and issuing date of each amendment];
  2. We offer to supply in conformity with the Bidding documents, including the UNOPS General Conditions of Contract and in accordance with the Schedule of Requirements;
  3. Our Proposal shall be valid for the period of time of 60 Days from the date fixed for the Proposal submission deadline as set out in the RFP, and it shall remain binding upon us and may be accepted at any time before the expiration of that period;
  4. If our Proposal is accepted, and if so requested in the Tender Particulars section, we commit to obtain a performance security, in accordance with Instructions to Offerors, Article 35 and the General Conditions of Contract;
  5. We have no conflict of interest in any activity that would put it, if selected for this assignment, in a conflict of interest with UNOPS;
  6. We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgment or pending legal action against them that could impair their operations in the foreseeable future;
  7. Our firm confirms that the offeror and sub-contractors have not been associated, or had been involved in any way, directly or indirectly, with the preparation of the design, terms of references and/or other documents used as a part of this solicitation;
  8. We embrace the principles of the United Nations Supplier Code of Conduct and adhere to the principles of the United Nations Global Compact;
  9. Our firm, its affiliates or subsidiaries – including any subcontractors or suppliers for any part of the contract – has not been declared ineligible by UNOPS, nor is included in the suspended/ineligibility list of the UN/PD, other UN Agencies, the UN Security Council, and the World Bank, in accordance with Instructions to Offerors Article 4, Eligibility;
  10. We have not offered and will not offer fees, gifts and/or favours of kind in exchange for this RFP and will not engage in any such activity during the performance of any contract awarded;
  11. We understand that you are not bound to accept the lowest evaluated Proposal or any other Proposal that you may receive.

I, the undersigned, certify that I am duly authorized by [***insert name of Offeror***] to sign this Proposal and bind [***insert name of Offeror***] should UNOPS accept this Proposal:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[*Stamp form of Proposal with official stamp of the Offeror*]

Form C: Financial Proposal Form

RFP reference no: RFP/2020/15140

Name of Offeror: [insert name of offeror]

The Proposer is required to prepare the Financial Proposal following the below format and be submitted in an envelope separate from the rest of the RFP as indicated in the Instruction to Offerors. Please ensure that this form is uploaded in the financial envelope checklist under the Financial Offer Details tab of the eSourcing system.

The financial proposal must be submitted in RFP/2020/15140.

The Financial Proposal must be filled in in both Tables 1 and 2 below (for which the total amount should match), including provision of a detailed cost breakdown. Provide separate figures for each functional grouping or category. The format includes specific expenditures under Table 2, which may or may not be required or applicable but are indicated to serve as examples. Offerors may adjust the name of expenditures under Table 2 if necessary.

**Table 1: Cost breakdown per deliverable/output**

|  |  |  |
| --- | --- | --- |
| **Item No** | **Deliverables** | **Price**  **(Lump Sum, All Inclusive)** |
| 1 | Soft Launch of LMS | [Offeror to insert price] |
| 2 | Full Launch of LMS | [Offeror to insert price] |
| 3 | Accompanying Documents (i.e. User Guides, Documented Upgrade and Enhancement Plans, Disaster Recovery Plan, Security Plan) | [Offeror to insert price] |
| 4 | Hosting Services for 3 Year Period (up to 3,000 LMS Users)\* | [Offeror to insert price] |
| **Total financial proposal [USD]** | | **[Insert total lump sum price]** |

**Table 2: Cost breakdown per component**

Offerors are requested to provide the cost breakdown for the above given prices based on the following format. UNOPS shall use the cost breakdown for the price reasonability assessment purposes as well as the calculation of price in the event that both parties agree to a contract amendment on the future.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Cost component** | **Qty.** | **No. of Personnel** | **Remuneration per Unit** | **Total Rate for the Period** |
| Project Manager |  |  |  | [Offeror to insert price] |
| Other Personnel [each should be a separate line item] |  |  |  | [Offeror to insert price] |
| **Sub-total personnel costs** | | | | **[Insert total lump sum price]** |
| Other costs (provide details) |  |  |  | [Offeror to insert price] |
| Hosting Services\* | 3 Years | N/A |  | [Offeror to insert price] |
| **Sub-total other expenses** | | | | **[Insert total lump sum price]** |
| **Total financial proposal [USD]** | | | | **[Insert total lump sum price]** |

\*Hosting services will be reimbursed on a monthly basis.

**Cost reimbursable component**

*Bidders will be reimbursed on a monthly basis based on the below costing structure for actual number of users, up to 3,000 users.*

|  |  |  |
| --- | --- | --- |
| **Cost component** | **Qty. (User)** | **Rate per user** |
| LMS User | 1 |  |

**Optional Cost**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Cost component** | **Qty.** | **No. of Personnel** | **Remuneration per Unit** | **Total Rate for the Period** |
| Hosting Services for Option Year | 1 Year | N/A |  |  |
| Cost for French and Spanish language functionality | | | |  |
| Cost for Arabic language functionality | | | |  |
| Cost for report customization | | | |  |
| Cost for WhatsApp communication option | | | |  |

The discounts offered, if applicable, and the methodology for their application are:

* **Discounts**: If our proposal is accepted, the following discounts shall apply. For example, if higher user volumes result in lower per user costs. [Specify in detail each discount offered and the specific item of the Schedule of Requirements to which it applies, including if applicable discounts for accelerated payment.]
* **Methodology of application of the discounts**: The discounts shall be applied using the following method: For example, based on monthly user invoices. [Specify in detail the method that shall be used to apply the discounts];

**List of subcontractors or suppliers**

Offeror must identify the names of all subcontractors/suppliers who will be providing good/services under this contract and the type of work being subcontracted, if applicable.

1. \_[Full legal name and address of subcontractors]\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the undersigned, certify that I am duly authorized by [***insert full name of Offeror***] to sign this Proposal and bind [***insert full name of Offeror***] should UNOPS accept this Proposal:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form D: Technical Proposal Form

RFP reference no: RFP/2020/15140

Name of Offeror: [insert name of offeror]

The Offeror’s proposal must be organized to follow the format of this Technical Proposal Form. Where the offeror is presented with a requirement or asked to use a specific approach, the offeror must not only state its acceptance, but also describe, where appropriate, how it intends to comply. Where a descriptive response is requested, failure to provide the same will be viewed as non-responsive.

Technical Proposal Evaluation sections:

|  |  |
| --- | --- |
| **Section 1: Offeror’s qualification, capacity and expertise** | |
| 1.1 | **Brief description of the organization and general organizational capability which is likely to affect implementation, including global experience, types of activities undertaken, management structure, financial stability and project financing capacity, project management controls, capability to provide the full cycle of the LMS design, development, and delivery extent to which any work would be subcontracted**  [Insert response here] |
| 1.2 | **Relevance of specialised knowledge and experience on similar engagements done in the past (please provide details)**  [Insert response here] |
| 1.3 | **Quality assurance procedures and risk mitigation measures**  [Insert response here] |
| 1.4 | **Organizations commitment to sustainability (please provide details)**  [Insert response here] |

|  |  |
| --- | --- |
| **Section 2: Proposed Methodology, Approach and Implementation Plan** | |
| 2.1 | **Describe the proposed methodology, implementation approaches, and tools in order to meet or exceed the requested outputs and deliverables that show your understanding of the scope of services as outlined in the Schedule of Requirements.**  [Insert response here] |
| 2.2 | **Description of available performance monitoring and evaluation mechanisms and tools; how they shall be adopted and used for a specific requirement. Description of available regular system updates to remain compatible with current operating systems and communication system to provide updates regarding the upgrades and scheduled system downtime.**  [Insert response here] |
| 2.3 | **Provide a weekly detailed implementation/work plan with timeline of activities and number of days**  [Insert response here] |

|  |  |
| --- | --- |
| **Section 3: Key personnel proposed** | |
| 3.1 | **Composition and structure of the team proposed. Are the proposed roles of the management and the team of key personnel suitable for the provision of the necessary services**  [Insert response here by filling up the below table]   |  |  |  | | --- | --- | --- | | **Name and Nationality** | **Position to be Assumed in this Contract** | **Requirements as per Terms of reference** | | [Insert] | Project Manager | Copy the requirements in the TOR. If you are proposing additional personnel not included in the min. structure, please make this column as N/A | | [Insert] | Other Personnel (if any) |  | | [Insert] | Other Personnel (if any) |  | |  |  |  | |
| 3.2 | **Qualifications of key personnel proposed**  [For each of the names identified above, attach his/her CV using the format in Form F: Format for Resume of Proposed Key Personnel. If so required in Section I, also attach his/her Form I: Statement of Exclusivity and Availability] |

I, the undersigned, certify that I am duly authorized by [***insert full name of Offeror***] to sign this Proposal and bind [***insert full name of Offeror***] should UNOPS accept this Proposal:

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form E: Format for Resume of Proposed Key Personnel

RFP reference no: RFP/2020/15140

Name of Offeror: [insert name of Offeror]

|  |  |
| --- | --- |
| Position | [Insert] |
| Name of Personnel | [Insert] |
| Title | [Insert] |
| Years with firm | [Insert] |
| Nationality | [Insert] |
| Language proficiency | [Insert] |
| Education/ Qualifications | [Summarize college/university and other specialized education of personnel member, giving names of schools, dates attended, and degrees/qualifications obtained.] |
| Professional certifications | [Provide details of professional certifications relevant to the scope of services]   * Name of institution: [Insert] * Date of certification: [Insert] |
| Employment Record/ Experience | [Starting with present position, list in reverse order, every employment held. List all positions held by personnel since graduation, giving dates, names of employing organization, title of position held and location of employment. For experience in last five years, detail the type of activities performed, degree of responsibilities, location of assignments and any other information or professional experience considered pertinent for this assignment.] |
| References | [Provide names, addresses, phone and email contact information for two (2) references]  Reference 1:  Reference 2: |

I, the undersigned, certify to the best of my knowledge and belief, this bio-date is accurate.

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

Signature of Personnel (individual) or firm representative Date (Day/Month/Year)

Form F: No Adverse Action Confirmation Form

RFP reference no: RFP/2020/15140

Name of Offeror: [insert name of Offeror]

Date: [insert submission date]

This is to certify that [delete unwanted option]:

* 1. No adverse action has been taken against the Offeror [insert name of Offeror] and the manufacturers [insert manufacturer’s names] whose products are being offered by the Offeror against this Request for Proposals, in the last 5 (Five) years.
  2. The following instances of previous past performance have resulted in adverse actions taken against the Offeror [insert name of Offeror] and the manufacturers [insert manufacturer’s names] whose products are being offered by the Offeror, in the last 5 (Five) years. Such adverse actions included:

[Indicate date and reasons for adverse actions and result of adverse actions, i.e. suspension or cancellation of manufacturing license by regulatory authorities, product recalls, blacklisting, debarment from proposalding etc.]

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Form G: Previous experience form

RFQ reference no: RFP/2020/15140

Name of Bidder: [insert name of Bidder]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of services/goods** | **Country** | **Total amount of Contract** | **Contract Identification and Title and**  **Contact details of Client**  **(Name, Address, telephone, email, fax)** | **Year project was undertaken** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_