

**ANNEX A – Application Form**

Call for Proposal: WSSCC – Global Sanitation Fund Supported Programme Evaluation in Togo and Benin

Project No: 12272-001

Case No.: CFP/WSSCC/WP23/2020/64

Deadline: **Monday 20 July 2020 17:00PM Geneva Local Time**

Late submissions will not be accepted

Please submit your application by email only to the following individual:

# Ms Elke de Buhr; [elkejohannad@unops.org](mailto:elkejohannad@unops.org)

# Instructions

Please complete the form below and return via email to the individual listed above only.

# Section 1: General Information

**1.1 Organisational Details**

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| **1** | **Full Legal Name of Entity – In UN Language** |  |
| **2** | **Full Legal Name of Entity – In Local Language** |  |
| **3** | **Mailing Address** |  |
| **4** | **Physical Office Address (If different from above)** |  |
| **5** | **Office Telephone Number (Please include country code)** |  |
| **6** | **Website Address (If applicable)** |  |
| **7** | **Social Media Link(s) (If applicable)** |  |
| **8** | **Contact Person, Name and Title** |  |
| **9** | **Contact Person, E-mail address** |  |
| **10** | **Contact Person, Phone number** |  |
| **11** | **Year organization was registered** |  |
| **12** | **Legal status of organization** |  |
| **13** | **Registration Number (or equivalent)** |  |
| **14** | **Tax ID Number (if applicable)** |  |

**1.2 Executive Officer**

|  |  |
| --- | --- |
| **Name (Family Name, Given Name)** |  |
| **Title** |  |
| **Email** |  |
| **Address** |  |
| **Phone Number with Country Code** |  |

**1.3 Project Contact**

Please list one individual with whom UNOPS/WSSCC could liaise regarding the project’s implementation, progress, data, timeline, and reports. You may add multiple contacts if necessary.

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| --- | --- |
| **Name (Family Name, Given Name)** |  |
| **Title** |  |
| **Email** |  |
| **Address** |  |
| **Phone Number with Country Code** |  |

**1.4 Part H: Host(ing) Information**Do you intend to sub-grant funding to one or more organizations? If so, please explain and list names of sub-grantees if possible.

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| ***Organisation Name*** | ***Responsibilities of the Sub-Grantee*** |
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# Section 2: Organisational Capacity

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| Please elaborate on your organization’s qualifications and ability/experience managing grant-funded projects. |
| *Please ensure that your detailed response demonstrates all of the following:*   * + - 1. 3 - 5 years of experience of research in WASH related sectors and statistics       2. The entity’s background, mandate, registration and previous projects       3. Capacity and standard system to handle financial management/reporting of grant funds (finance/grant management staff available within organization)       4. The composition of research team (minimum two, one leading researcher and one assistant) - at least one of the team members (ideally the lead researcher), must have French skills. |
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# Section 3: Professional expertise and previous experience

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| Please elaborate on your proposed research team, their qualifications and ability/experience per Section 5 – Scope of the Proposal |
| *For the Lead Researcher, please ensure that your detailed response demonstrates all of the following:*   * 1. CV including list of previous reports/publications   2. Seven (7) years’ specific experience with research and monitoring methods related to sanitation and hygiene, including previous evaluations, which shows:      1. Demonstrated experience in qualitative and quantitative evaluation methods, including formulating and managing innovative multi-country research      2. Knowledge in statistical sampling and weight procedures      3. Data quality assessment skills      4. Field experience in resource poor settings and surveying of marginalized, hard to reach populations      5. Familiarity with designing national monitoring and evaluation systems, WASH related M&E experience preferred      6. Strategic perspective on evaluating organizational results   3. Specific data analytical experience, particularly experience with WASH including CLTS, and behavioral changes and health outcome analysis highly desirable   4. Excellent command/highly proficient in spoken and written English   5. Preferred: Excellent command/highly proficient in spoken and written English and French |
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| Please elaborate on your proposed research team, their qualifications and ability/experience per Section 5 – Scope of the Proposal |
| *For the Assistant, please ensure that your detailed response demonstrates all of the following:*   1. CV including list of previous reports/publications 2. Two (2) years’ specific experience with M&E methods related to sanitation and hygiene, including participation in previous evaluations, which shows:    * 1. Demonstrated experience in qualitative and quantitative M&E methods, including formulating and managing innovative multi-country research      2. Knowledge in statistical sampling and weight procedures      3. Data quality assessment      4. Field experience in resource poor settings and surveying of marginalized, hard to reach populations 3. Specific data analytical experience, particularly experience with WASH including CLTS, and behavioral changes and health outcome analysis highly desirable 4. Excellent command/highly proficient in spoken and written English 5. Preferred: Excellent command/highly proficient in spoken and written English **and** French |
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# Section 4: Methodology and Approach

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| Please elaborate on your proposed methodology and approach, demonstrating understanding of the assignment, timelines and deliverables |
| *Please ensure that your detailed response demonstrates all of the following:*   1. Proposed timeline (in Gantt format) for the lead researcher and the assistant to complete the assignment, in line with the timeframe provided in Section 4 – Duration of Assignment, Proposed Schedule 2. Proposed daily rates for the leading researcher and assistant and travel/data collection costs (as per Annex B – Grant Budget) 3. Proposed approach includes attention to gender balance in proposed team composition |
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# Section 5: Checklist & Statement of Assurances

*Prior to submission, please ensure that you have completed the following:*

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| **No.** | **Description** |  |
| 1 | Annex A - Grant Application Form (Mandatory) |  |
| 2 | The last page of this document: Annex A – Grant Application Form, signed and scanned (PDF) (Mandatory) |  |
| 3 | Annex B - Grant Budget (MS Excel) (Mandatory) |  |
| 4 | Grant Budget Narrative (MS Word) (Recommended) |  |

*By signing this document, you attest that all statements made within this grant application form are true and accurate to the best of your abilities.*

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

Name & Title of Executive Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Executive Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_