

EXPRESSION of INTEREST (EoI) – Hearing aids and diagnostic devices

Closing date of EoI: 24 November 2024

*(Please check the appropriate boxes and return to UNICEF)***A - GENERAL INFORMATION**

Supplier's full name:			
Type of company	Manufacturer <input type="checkbox"/>	Trader <input type="checkbox"/>	Other <input type="checkbox"/>
Address:			
Country:			
Email address (company):			
Website address:			
Telephone:			
Fax:			
Contact person:			
E-mail address (personal):			

B – INTEREST / CAPACITY TO SUPPLY THE FOLLOWING CATEGORIES

Categories	Yes	No
Category 1: Hearing Aids	<input type="checkbox"/>	<input type="checkbox"/>
Category 2: Audiological Equipment	<input type="checkbox"/>	<input type="checkbox"/>
Category 3: Calibration Equipment	<input type="checkbox"/>	<input type="checkbox"/>
Category 4: 3D Earmold Production	<input type="checkbox"/>	<input type="checkbox"/>
Category 5: Accessories	<input type="checkbox"/>	<input type="checkbox"/>

C – INTERNATIONAL COVERAGE

	Yes	No	
Ability to supply UNICEF worldwide	<input type="checkbox"/>	<input type="checkbox"/>	If No, elaborate on geographical limitations:

D - COMPLIANCE WITH INTERNATIONAL QUALITY STANDARDS

Quality Management System (company):	Yes	No
ISO 13485:2016	<input type="checkbox"/>	<input type="checkbox"/>
ISO 9001	<input type="checkbox"/>	<input type="checkbox"/>

Market Clearance(s) (product):	Yes	No
CE Mark (EU)	<input type="checkbox"/>	<input type="checkbox"/>
FDA (USA)	<input type="checkbox"/>	<input type="checkbox"/>
Device License (Japan)	<input type="checkbox"/>	<input type="checkbox"/>
Device License (Canada)	<input type="checkbox"/>	<input type="checkbox"/>
GMPALS (Australia)	<input type="checkbox"/>	<input type="checkbox"/>
<i>If others, please specify:</i>		

E – ACCESS TO PRODUCT INFORMATION

	Yes	No	
Product information available on-line	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, specify web address:
Product catalogue available on-line	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, specify web address:
Other ways of providing access to product information	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, specify which way(s):

F- ADDITIONAL INFORMATION

	Yes	No
Registered with UNGM (www.ungm.org)?	<input type="checkbox"/>	<input type="checkbox"/>

On completion, please return this form to UNICEF by email to: Ruben Dario Mete (rmete@unicef.org) on or before 24 November 2024.