

# **Expression of Interest**

**for**

**Empanelment of consultancy agencies already empanelled  
with the departments / corporations / societies / institutions  
of Government of India/ Government of M.P.**

**Name & Address of Applicant Agency –**

**Area/sector of proposed empanelment –**

**Submitted to**

**M.P. State Cooperative Union Ltd**

**E-8/77 Shahpura, Bhopal- 462039**

Letter No.

Date:

To

The .....

.....

.....

Sub: Expression of Interest for Empanelment of consultants.

Sir,

MP State Cooperative Union Limited Bhopal is an apex cooperative institution registered under MP Cooperative Societies Act 1960 with a mandate of providing training, education and capacity building to its member institutions. It is also mandated it wishes to empanel consulting agencies for various projects relating to capacity buildings, studies, research, program implementation, policy advocacy etc. for the benefit of cooperative sector in particular and other sectors in general. The detailed terms and conditions of EOI are mentioned on our website **<http://www.mpscu.in>** which can be download by the interested agencies or can be procured from the office.

The important documents include -

- a. News Paper advertisement inviting EOI.
- b. General information of applicant
- c. Evaluation method – score sheet
- d. Other terms and conditions
- e. Formats of application
- f. Documents to be enclosed.

The interested agencies may apply as per the instructions given in the EOI document on or before 27 Aug 2024 at 5.00 PM in the office of under signed. The Managing Director reserves the right to cancel this EOI without assigning any reason.

Managing Director

**(On letter head)**

Letter No

Date:

To

The Managing Director,  
MP State Cooperative Union Ltd,  
E 8 /77, Shahpura,  
Bhopal – 462039 (MP)

**Sub: Expression of Interest for Empanelment of Consultants.**

Sir,

With reference to your EOI published on ..... in ..... (name of the newspaper)...., we have procured the EOI document from your website / office. We have read and understood all the terms and conditions mentioned therein, we hereby submit our proposal along with all the relevant requisite documents for your kind consideration.

**Yours sincerely,**

**(Authorised signatory)**

## General Information

Sn	Particulars	Details
1	Nature of Work	Empanelment of Agencies for It wishes to empanel consulting agencies for various projects relating to capacity buildings, studies, research, program implementation, policy advocacy etc. for the benefit of cooperative sector in particular and other sectors in general.
2	Proposals Invited by	MP State Cooperative Union Ltd E 8 /77, Shahpura,Trilanga Road Bhopal (MP) 462039
3	Contact person	Mr. Sanjay Singh Mobile no. +919826821281 Phone No. - 0755- 2926160, 2926159
5	Date of issue of Expression of interest	
6	Last date and time of submission of proposal	
7	Place of submission	MP State Cooperative Union Ltd E 8 /77, Shahpura ,Trilanga Road Bhopal (MP) 462039
8	Date of opening of proposals	In one Month.
9	Details of Application fee	Demand Draft No. ----- Demand draft date ----- Amount ----- Name of the scheduled Bank -----
10	Validity of proposal	3 Years

### **Other terms and Conditions:**

1	Scope of work of consultant	The Consultant shall identify various areas of development interventions and prepare fund based projects accordingly in consultation with Apex union. The execution of the approved project / assignments would be the sole responsibility of the consultant.
2	Scope of work of Apex Union	Apex union, if convinced, with the submitted project, shall approve, supervise and monitor the project for a fee of no less than 10% of the project cost or as per MOU Agreement.
3	Validity of Empanelment	Two years from the date of signing of the MOU
4	General Eligibility criteria:	<ul style="list-style-type: none"> <li>a. Should be a Society / NGO/ Partnership / firm / Pvt Ltd / Corporation / Public limited company/ Cooperatives</li> <li>b. Should already be empanelled with Government of India or Govt of MP's Departments / Corporations / Societies/ Institutes/Projects.</li> <li>c. The applicant should have minimum 3 years experience in relevant sector.</li> </ul>
5	Technical Criteria	<p>Should have executed at least one similar project of</p> <ul style="list-style-type: none"> <li>a. Capacity building of minimum 100 participants</li> <li>b. Project worth Rs 10 lacs or above</li> </ul>
6	Financial Criteria	<ul style="list-style-type: none"> <li>a. The average annual turnover of last 3 financial years should not be less than Rs 25 lacs.</li> <li>b. The net worth should be positive.</li> </ul>
7	Sectors for empanelment	<ul style="list-style-type: none"> <li>a. Cooperation</li> <li>b. Agriculture and Allied Sectors</li> <li>c. Rural Development</li> <li>d. Minor forest Produce/ Forestry</li> <li>e. Entrepreneurship development</li> <li>f. Evaluation / Assessment / Research studies</li> <li>g. Human Resource Development</li> <li>h. Project Preparation</li> <li>i. Banking &amp; Finance</li> <li>j. Natural Resource management/Environment</li> <li>k. Programme Implementation.</li> <li>l. Skill Development</li> </ul>

		m. Advertisement & Information, Education, Communication (IEC) n. Communication o. IT Sector p. Any other relevant sector
8.	Proposal evaluation Criteria	a. The Proposal shall be evaluated by an evaluation committee as per the enclosed evaluation sheet. b. Agency scoring below 70 marks out of 100 is not eligible for empanelment. c. However the committee reserves the right to empanel any agency having exceptional know how/ expertise.
9.	Processing Fees	The applicant will have to deposit Rs 5000 as processing fees for each sector in form of demand draft drawn in favor of MP State Cooperative Union Ltd, Bhopal of any Scheduled bank, payable at Bhopal. Application without processing fees shall be rejected.
10	Signing of the document	Each page of the whole document is to be signed by the authorized signatory along with the seal.
11	Other	Applications must be submitted as per the given guidelines / formats.

### **Formats Enclosed**

Profile of the organization	Format 1
Area of expertise	Format 2
Infrastructure details	
Details of training centers	Format 3
Details of Manpower	Format 4
Work Experience	
Details of Last 3 years project consultancy experience	Format 5
Details of training conducted in 5 years	Format 6

## Format I –

### PROFILE OF THE ORGANISATION

<b>1. Name of Organisation</b>		
<b>2. Nature of Organisation</b> <b>(Please tick the appropriate sector)</b>	Society / NGO/ Partnership/ firm/ Pvt Ltd / Corporation / Public limited company/ Cooperatives	
<b>3. Registered Address</b>		
<b>4. Address for Communication, if different from above.</b>		
<b>5. Telephone No.</b>		
<b>6. E-mail ID</b>		
<b>7. Key Contact Person &amp; Mobile No.</b>		
<b>8. Registration No.</b>		
<b>9. PAN/TAN/GSTIN</b>		
<b>10. Turnover (Last three financial years) (Rs. In lakhs)</b> <b>(Audited balance sheets along with annexures and schedules is to be enclosed)</b>		
<b>Year</b>	<b>Total Turnover</b>	<b>Turnover from Training/ Consultancy</b>
<b>2023-24</b>		
<b>2022-23</b>		
<b>2021-22</b>		

## **Format 2 :AREA FOR EXPERTISE**

**Please tick mark as applicable**

<b>ACTIVITY</b>	<b>SECTORS</b>
<b>Training and capacity building</b>	
<b>Project preparation</b>	
<b>Studies / Evaluation / survey / Research</b>	
<b>Project Consultancy</b>	
<b>Programme Implementation.</b>	
<b>Any Others (Please Specify)</b>	

## **Format 3 :INFRASTRUCTURE DETAILS**

### **Details of Training infrastructure**

<b>Sn.</b>	<b>Location &amp; Address of Centres/ Offices/ Branches</b>	<b>Own/ Rented</b>	<b>Training/ Other Facilities available</b>	<b>Training Capacity (Candidates Seating Capacity)</b>	<b>Name &amp; Contact Person at the Centre</b>



#### Format 4 :DETAILS OF MANPOWER

Sn	Name of Employee	Designation	Age	Qualification	Experience in years	Area of Experience
<b>a. No. of full time Employees of the Organisation:</b>						
<b>b. No. of part time Employees of the Organisation:</b>						

#### Format 5 :WORK EXPERIENCE

##### A. DETAILS OF LAST 3 YEARS TRAININGS CONDUCTED

S.n.	Financial Years	Name of Project	No. of Candidates trained	No. of candidates placed/ Self employed	Value of the Project	Client Name

**B. DETAILS OF LAST 3 YEARPROJECT CONSULTANCY EXPERIENCE****(OTHER THAN TRAINING)**

Sn	Financial Year	Name of Project	Client	Value of the project	Nature of Work/ Project

**Documents Required: Please provide self certified copies of the following documents:**

Sn.	Description	Documents enclosed	Page No.
1	Copy of Registration	Yes/No	
2	Copy of PAN/TAN/ GSTIN	Yes/No	
3	C.V. of Professional Staffs duly signed	Yes/No	
4	Copy of Work Orders	Yes/No	
5	Copy of Annual Reports of last three financial years	Yes/No	
6	Photographs of infrastructure such as training hall, library, etc.	Yes/No	
7	Articles and Memorandum of Association/ Societies by laws / partnership deeds	Yes/No	
8	Details of Promoters/ Directors/ Governing Body Members		
9	Letters of appreciation for past work done, if any	Yes/No	
10	Details of trained candidates placed/ self employed, if any	Yes/No	

**Managing Director**