**Business Finance for the Poor in Bangladesh (BFP-B) Project**

Expression of Interest Application Form: Contents

**Development of a detailed Implementation Plan with M & E Framework and Resource Plan for National Financial Inclusion Strategy of Bangladesh (NFIS-B)**

**(EOI Application to be completed within 25 pages excluding Annex)**

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**Form of Letter of “Expression of Interest”**

[Applicants are requested to send forwarding Letter of Expression of Interest in the Letterhead Pad of their respective organisation and send the hard copy with signature in person or by mail or scan the hard copy of this letter and send by email with relevant attached documents]

Date...

To:

Katherine Hughes

Programme Manager (BFP-B)

Nathan Associates London Ltd.

Email: KHughes@nathaninc.com

&

Policy Manager

Business Finance for the Poor in Bangladesh (BFP-B) Project

Email: [rhasan@nathaninc.com](mailto:rhasan@nathaninc.com)

Sir / Madam,

1. Being duly authorised to represent and act on behalf of................................... hereinafter referred to as “the Applicant”), and having reviewed and fully understood all of the information provided in Request for Expression of Interest, the undersigned hereby expresses its interest in and applies to be short-listed by yourselves as a submitter of a proposal for the consulting services for the assignment titled ***‘Development of a detailed Implementation Plan with M & E Framework and Resource Plan for National Financial Inclusion Strategy of Bangladesh (NFIS-B)’.***
2. Programme Manager (BFP-B) and/or Policy Manager, BFP-B Project or Authorised representative of BFP-B Project is hereby authorised to conduct any inquiries or investigations to verify the statements, documents and information submitted in connection with this Expression of Interest, and to seek clarification regarding any financial and technical aspects. This Expression of Interest will also serve as authorisation to any individual or authorised representative of any institution referred to in the supporting information to provide such information deemed necessary and as requested by BFP-B Project to verify statements and information provided in this Expression of Interest, such as the human resources, experience, and competence of the Applicant.

1. This Expression of Interest is made with the full understanding that:
2. All information submitted in this Expression of Interest for qualification and selection for short-listing will be subject to verification at the time of submitting proposals by short-listed applicants;
3. The Representative of BFP-B Project reserves the right to reject or accept any application, cancel the qualification and selection for short-listing process at any stage, and reject all applications;
4. The Representative of BFP-B Project shall not be liable for any such actions and shall be under no obligation to inform the Applicant of the grounds for them.

*Applicants who are not Consortia should delete paragraph 4.*

1. We confirm that if we submit a proposal, that proposal, as well as any resulting contract, will be:
   1. Signed so as to legally bind all partners, jointly and severally; and
   2. Submitted with a consortium agreement providing the joint and several liabilities of all partners in the event the contract is awarded to us.
   3. Submitted with a Joint Venture partner information form and consortium agreement providing the business share of every partner in the consortium.

[Note: By declaration of paragraph 4 above, the lead partner and the other partner (experiences, technical and financial capacity) will be jointly evaluated. The sub-contracted firm is not the subject of evaluation.]

1. The undersigned of declaration on the statements made and the information provided in this Expression of Interest are complete, true, and correct in every detail.

|  |
| --- |
| **Signed:**    Name: |
| For and on behalf of (name of Applicant or lead of a Consortium): |

**For Joint Venture or Consortium, if applicable:**

|  |  |
| --- | --- |
| **Signed**    **Name** | **Signed**    **Name** |
| For and on behalf of (name of partner) | For and on behalf of (name of partner) |

EXPRESSION OF INTEREST FORM – 1 (A)

# A. General Information

[Note: All individual firms and each partner of a Consortium applying for pre-qualification and selection for short-listing are requested to provide following information in this form. Summary of Consortium should be provided, if applicable.]

**A-1 (a) Firm’s / Organisation’s Information**

|  |  |  |
| --- | --- | --- |
|  | Name of firm / organisation: | |
|  | Head office address: | |
|  | Telephone: | Contact (Name, position, telephone and email address): |
|  | Email: |
|  | Website: |
|  | Legal Status / Registration From: |  |
|  | Place of incorporation / registration: | Year of incorporation / registration: |

**A-1 (b) Firm’s Information (In addition to A-1 (a) above, submit the following in case of partnership or individually-owned firms)**

|  |  |
| --- | --- |
| **Information on the Owner / Board Members** | |
| Name and Position in the Firm / Organisation | Nationality |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**A-2 Summary of Joint Venture or Consortium (if any)**

|  |  |
| --- | --- |
| **Names of all partners of Consortium** | |
| Lead partner |  |
| Partner |  |
| Partner |  |

EXPRESSION OF INTEREST FORM 1 (B)

# B. Consortium Agreement, if any

To:

Katherine Hughes

Programme Manager (BFP-B)

Nathan Associates London Ltd.

Email: [KHughes@nathaninc.com](mailto:KHughes@nathaninc.com)

&

Policy Manager

Business Finance for the Poor in Bangladesh (BFP-B) Project

Email: [rhasan@nathaninc.com](mailto:rhasan@nathaninc.com)

The undersigned of this declaration of cooperation are authorised to act with regard to the Expression of Interest in the consulting services for assignment titled ‘***Development of a detailed Implementation Plan with M & E Framework and Resource Plan for National Financial Inclusion Strategy of Bangladesh (NFIS-B)’*** on behalf of their organisations.

They hereby declare:

1. That they will legalise a consortium Agreement in case for consulting services for the above mentioned study is awarded to their group;

2. That they have nominated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of the lead partner] as the Lead Firm/Organisation of the group for the purpose of this Expression of Interest;

3. That they authorised Mr. /Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_ [name of the person who is authorised to act as the Representative on behalf of the Consortium] to act as the Representative in the name and on behalf of their group for the purpose of this Expression of Interest.

4. That the partners, \_\_\_\_\_\_\_\_\_\_\_\_\_ [name of the partners] of the consortium having the business share of \_\_\_\_\_\_\_\_\_\_\_\_\_ [percentage of share] respectively to the consortium.

5. That all partners of the Consortium shall be liable jointly and severally for the execution of the Contract;

6. That this Consortium is an association constituted for the purpose of providing consulting services for the above mentioned study under the Contract

7. That each and every partner to this Consortium shall provide at least one expert for the contract period in any one of the required areas of expertise for the study.

8. That this Consortium should be post-disqualified in case the Consortium should breach the agreement in respect of item 5 above when submitting a Proposal;

9. If the Representative of BFP-B Project accepts the Proposal of this Consortium, it shall not modify the composition or constitution of the consortium formed and proposed in the Proposal until the completion of Contract without the prior written consent of the Representative of BFP-B Project;

Give names and positions of the proposed Consortium Representatives, as well as organisation's names and addresses:

|  |  |  |
| --- | --- | --- |
| 1 | Name: | Signature: |
| Position: | Date: |
| Representative of: (Lead Organisation's Name and address) | |

|  |  |  |
| --- | --- | --- |
| 2 | Name: | Signature: |
| Position: | Date: |
| Representative of: (Partner Organisation's Name and address) | |

|  |  |  |
| --- | --- | --- |
| 3 | Name: | Signature: |
| Position: | Date: |
| Representative of: (Partner Organisation's Name and address) | |

[Add more if needed]

EXPRESSION OF INTEREST FORM - 2

**1.0 Total number of national strategies / implementation plan / M & E plan / resource plan/ policy researches / studies conducted in the last 10 years**

Please mention the number and title of the research studies conducted. Please do not provide information of project evaluated / project implemented / training offered etc.

|  |  |  |
| --- | --- | --- |
| SL.Nos. | Name/Title of national strategies / implementation plan / M & E plan / policy researches / studies/ resource plan conducted in 10 years. | National strategies / implementation plan / M & E plan / policy researches / studies/ resource plan relevant to regulatory work / government agencies |
|  |  | *[please* tick√ *if applicable]* |
|  |  |  |

**2.0 Related national strategies / implementation plan / M & E plan / policy researches / studies /resource plan conducted in the last 10 years**

***Please provide a list of related* national strategies / implementation plan / M & E plan / policy researches / studies/ resource plan *conducted in the last 10 year***

[Note: All individual firms and all partners of a consortium are requested to provide information, in this form, of the similar service contracts in last ten (10) years. Major research or studies must be related to the following fields:

|  |  |
| --- | --- |
| Related areas | List of related national strategies / implementation plan / M & E plan / policy researches / studies/resource plan with name/title of study |
| Financial Inclusion | 1.  2.  *[Please add more if needed]* |
| Access to finance |  |
| Mobile Financial Services (MFS) and/or Mobile Money |  |
| Digital Financial Services |  |
| Payment Systems / Payment Architecture |  |
| Savings and/or Deposit Mobilisation |  |
| Agent Banking/branchless banking |  |
| Microfinance |  |
| Micro, Small and Medium Enterprise (MSME) finance |  |
| Rural Finance / Agriculture Finance / Value Chain Finance |  |
| Insurance / Microinsurance |  |
| Financial literacy and /or Consumer protection |  |
| Supply side survey on financial institutions (Banks / NBFIs / MFIs/Fin Techs) |  |
| Policy, regulatory and legal analysis of Bangladesh financial sector |  |
| Women and youth access to finance |  |
| Green Financing |  |
| Donor and/or government fund analysis |  |

|  |
| --- |
| **1. Name of Applicant or Name of Consortium and name of the partner to provide information:** |

[The value of the contract/budget should be based on the currencies of the contracts converted into British Pound Sterling (GBP), at the date of substantial completion, or for current contracts at the time of award.]

**2. Relevant Experience**

|  |  |
| --- | --- |
| 1. Name of assignment: | Country: |
| Duration (from month/year/to month/year) | Employer/Client: |
| Contract status of the firm ( Please √):  1. Sole 2. Joint Venture 3. Subcontractor | |
| Total contract/budgeted amount: | Contract/budgeted amount of the firm: |
| Summary of the service: | |

|  |  |
| --- | --- |
| 1. Name of assignment: | Country: |
| Duration (from month/year/to month/year) | Employer/Client: |
| Contract status of the firm ( Please √):  1. Sole 2. Joint Venture 3. Subcontractor | |
| Total contract/budgeted amount: | Contract/budgeted amount of the firm: |
| Summary of the service: | |

|  |  |
| --- | --- |
| 1. Name of assignment: | Country: |
| Duration (from month/year/to month/year) | Employer/Client: |
| Contract status of the firm ( Please √):  1. Sole 2. Joint Venture 3. Subcontractor | |
| Total contract/budgeted amount: | Contract/budgeted amount of the firm: |
| Summary of the service: | |

[Add more if needed]

EXPRESSION OF INTEREST FORM - 3

**3.0 Number of national strategies / implementation plan / M & E plan / policy researches / studies /resource plan conducted in Bangladesh in the last 10 years.**

Please mention the number only.

**4.0 Number of projects and reports conducted in supporting financial inclusion, digital financial services, policy and regulatory analysis and MSE development in the past 10 years.**

Please mention the number and name/title of the projects or reports.

|  |  |
| --- | --- |
| Sl. Nos. | Name/title of projects or reports conducted in supporting financial inclusion, digital financial services and MSE development in last 10 years |
|  |  |
|  |  |

**5.0 Human Resource Information**

**5.1 Number of full-time research staffs**

Please mention the number of staffs only. The full-time research staffs may include total number of full time researchers, research assistants and survey coordinators.

**5.2 The Applicants are requested to provide personnel information to be possibly assigned for the specified area mentioned in the followings;**

1. Financial Inclusion - Access to Finance research
2. Operational Plan development for national level strategies
3. M & E Framework development for national level strategies
4. Banking sector( Agent Banking / MSME Banking)
5. Payment Systems
6. Digital Financial Services / Mobile Financial Services
7. Microfinance sector
8. Insurance Sector
9. Policy and regulatory analysis

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **List of Proposed Personnel with qualification for this assignment** | | | | |
| **Name of experts/professionals** | **Area of**  **Expertise** | **Employment Status with Firm (full-time/ part-time/other)** | **Education / Degree (Year / Institution)** | **No. of years of relevant experiences** |
| **Team Leader:** |  |  |  |  |
| M & E Expert |  |  |  |  |
| Resource / Financial Planning Expert |  |  |  |  |
| Other Experts |  |  |  |  |

**6.0 Age of the Consulting Firm (Years) / Number of years the Consulting Firm is involved in consultancy services**

Please mention the number of years.

**7.0 Number of countries conducted research and/or implemented projects** **related to national strategies / implementation plan / M & E plan / policy researches / studies/resource plan.**

Please mention number of countries, name of the country, project/research study title etc.

|  |  |  |
| --- | --- | --- |
| SL. Nos. | Name/title of Project/Research study | Name of country |
|  |  |  |
|  |  |  |

**8.0 Number of development organisations / donors agencies worked with**

Please mention the name of development organisations / donor agencies and the title of the assignment.

|  |  |  |
| --- | --- | --- |
| Sl. Nos. | Name of development organisations / donor agencies | Name/title of assignment |
|  |  |  |
|  |  |  |
|  |  |  |

EXPRESSION OF INTEREST FORM - 4

# Financial Capacity

|  |  |  |  |
| --- | --- | --- | --- |
| **Financial Information of the Applicant (Annual Turnover / Annual total Revenue in GBP. Please mention exchange rate)** | | | |
| **Sources of Revenue** | **2016** | **2017** | **2018** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Revenue** |  |  |  |