**Yuwalaya, Lalitpur**

**Supplier Registration Form- Individual Consultant**

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| **Section 1: General Information** | | | | | | | |
| 1- Name of Consulting Firms/Individuals | | | |  | | | |
| 2-Address: District | | | | 3- Mailing address (if different) | | | |
| VDC/ Ward No | | | |
| Postal Code | | | |
| Street | | | |
| P.O. Box Number | | | |
| Country | | | |
| 4- Telephone | |  | | 5- Fax | |  | |
| 6- Website | |  | | 7- Mobile | |  | |
| 8- Contact Name and Title: | | | | | | 9- Email: | |
| 10- PAN Number: | | | | | | | |
| 11- Working Language: English Nepali Other | | | | | | | |
| **Section 2: Academic and Technical Capability and Information** | | | | | | | |
| 12- Highest Academic degree you have gained | | | | |  | | |
| 13- Total years of experience in training facilitation | | | | |  | | |
| 13- Have you ever work in with Yuwalaya/Oxfam in Nepal before | | | | | **No Yes When** | | |
| **14- Major Expertise** | | | 1 | |  | | |
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| **15- Academic Records** | | | | | | | |
| **SN** | **Name of Degree** | | **University/Country** | | | | **Major- Research** |
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| **16 - List of major training you have done as per your core expertise** | | | | | | | |
| **SN** | **Title of Assignments** | | **Client Organization** | | | | **Duration of the Assignment** |
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| **If you want to provide more details, please submit your letter of interest and updated CV** | | | | | | | |
| **17. Payment Terms:** Agreed Disagree  If disagree, Please state your payment terms: | | | | | | | |
| Yuwalaya’s standard payment for supply, service and works contracts is 100% payment within 30 days after delivery of service and upon receipt of the contractor’s invoice and shipping documents. Prepayment is in general only acceptable against a prepayment guarantee covering the full amount of the prepayment. | | | | | | | |
| **18.** **CERTIFICATION:**  I, the undersigned, hereby accept the basic Terms and Conditions, a copy of which has been provided to me and warrant that the information provided in this form is correct, and in the event of changes, details will be provided as soon as possible:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature  Name  Designation  Date | | | | | | | |
| **NOTE:** Completing this form does not automatically mean that Consultants Firms/Individuals will be added to our Approved Consultant Database. The Yuwalaya reviews and evaluates submissions and contacts prospective Consultants Firms/Individuals as necessary. | | | | | | | |