**EPF Capacity Building Programme Phase IV**

**BULGARIA**

Annex I:

Tender Submission Form

**Please fill in the form in English and leave the irrelevant parts blank and send it to EPF Capacity Building Officer Selena Imerovic Hodzic** [**selena.imerovic@eu-patient.eu**](mailto:selena.imerovic@eu-patient.eu) **by 3rd January 2017 together with a CV of people involved in implementing the action.**

# Information on the tenderer

**The tender is submitted by**

|  |  |
| --- | --- |
| **Name of the tenderer[[1]](#footnote-1)** |  |
| **Address** |  |
| **City** |  |
| **Postcode** |  |
| **Country** |  |
| **Website** |  |
| **E-mail** |  |

**The contact person for this tender is:**

|  |  |
| --- | --- |
| **Name** |  |
| **Position/function** |  |
| **Office address** |  |
| **Telephone** |  |
| **Fax** |  |
| **E-mail** |  |

**The person authorized to represent the tenderer and to sign the contract is:**

|  |  |
| --- | --- |
| **Name** |  |
| **Position/function** |  |
| **Office address** |  |
| **Telephone** |  |
| **Fax** |  |
| **E-mail** |  |

# Technical Part

As mentioned in the call for tender participation is open on equal terms to all natural and legal persons who meet the following criteria:

|  |  |  |
| --- | --- | --- |
| **Qualitative award criteria** | | |
| **Qualitative criteria 1:** | **Relevance of the experience and expertise of the proposed team to the Fundraising as well as Accessing EU Funding Opportunities, including their assigned roles** | **25 points** |
| **Qualitative criteria 2**: | **Understanding of the nature and purpose of this service, with the focus on patient organizations’ capacity building needs in Fundraising in its current context** | **25 points** |
| **Qualitative criteria 3**: | **Quality and relevance of the detailed methodologies proposed** | **25 points** |
| **Qualitative criteria 4**: | **Technical offer - price** | **25 points** |

**Please describe how you fulfil the requirements set out above.**

|  |
| --- |
| **1 - Relevance of the experience and expertise of the proposed team to the Fundraising as well as Accessing EU Funding Opportunities, including their assigned roles** |
| **2 - Understanding of the nature and purpose of this service, with the focus on patient organizations’ capacity building needs in Fundraising in its current context** |
| **3 - Quality and relevance of the detailed methodologies proposed:** |

# Financial part

**Please provide details regarding your financial offer (which will be scored as a part of 4th award criteria):**

1. **Personnel costs**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the trainer** | **Daily rate in Euros** | **N. days** | **Total in Euros (specify if VAT inclusive)** |
| Person 1 |  |  |  |
| Person 2 |  |  |  |

1. **Other Costs involved in implementing the task: Please specify**

|  |
| --- |
|  |

1. Please indicate the official name of the company/organisation/institution etc.

   Only if the tenderer is a natural person indicate his/her name: in this case the information for ‘contact person’ and for the ‘person authorised to represent the tenderer and to sign the contract’ must be left blank. [↑](#footnote-ref-1)