**Template for Offer to provide Decentralized Evaluation Services**

**[Programme/Activity Evaluations]**

**Evaluation title:**

**Commissioning unit:**

**WFP Evaluation Manager:**

**Supplier’s name:**

**LTA number:**

**Date:**

**Sections**

1. **Technical Proposal**
2. **Proposed Evaluation Team**
	1. **Team composition**
	2. **Team competencies related to the Terms of Reference**
3. **Quality Assurance Mechanisms**
4. **Ethical concerns**
5. **Risk Management**
6. **Budget**
7. **Technical Proposal**

*Describe the evaluation approach, methodology, timing and data collection methods to be used to meet the evaluation TOR, including opportunities, limitation and risks.*

*Include a statement on accountability to affected populations.*

1. **Proposed Evaluation Team**
	1. **Team composition[[1]](#footnote-1)**

*Describe overall approach to team composition and, using the table below, provide team members ‘profiles (include CV in Annex) as well as role and responsibilities in the assignment.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Team Member** | **Profile** | **Role** | **Responsibilities/Coverage**  |
|  |  | Team Leader |  |
|  |  | Senior Evaluator |  |
|  |  | Evaluator |  |
|  |  | Junior Evaluator |  |
|  |  | Researcher |  |
|  |  | Data Analyst |  |
|  |  | Quality Assurance |  |
|  |  | Other (Facilitator, Presenter, Enumerators, Evaluation-related Communications Expert) |  |

* 1. **Team competencies required to meet the Terms of Reference**

*Using the table below, describe the competencies of each team members to meet the evaluation TOR.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Experience category** | Team member’s name | Team member’s name | Team member’s name | Team member’s name |
| Formal Education |
| Academic level |  |  |  |  |
| General Competencies *provide specific competencies against the required areas* |
| Years of experience in development/humanitarian cooperation |  |  |  |  |
| Knowledge of evaluation design and methodology |  |  |  |  |
| Experience with Programme/Activity Evaluation within the UN system  |  |  |  |  |
| Writing and Communication Skills |  |  |  |  |
| Familiarity with Country/ies or Regional Contexts |  |  |  |  |
| Knowledge of the *thematic Area* required in the TOR |  |  |  |  |
| Knowledge of the *Thematic Area* required in the TOR |  |  |  |  |
| *Add as required* |  |  |  |  |

1. **Quality Assurance Mechanisms**
* Who the evaluation manager will be.
* How the quality (transparency, credibility, utility, efficacy) of the evaluation management process will be ensured.
* How the quality of the evaluation outputs will be ensured.
* Who will be the designated person(s) responsible for quality assurance. In cases where the company intends to involve other staff members / consultants than the designated evaluation manager, please provide their profiles and add CVs in annex. Use the table below to describe key competencies.
* In addition to the requirements for the team members of the evaluation to produce quality outputs in line with DEQAS, what other mechanisms will be put in place to assure quality.
1. **Ethical Concerns**

Please provide details on any specific ethical issues foreseen and how these will be addressed.

1. **Risk Management**

Please describe any specific measures planned to address risk management.

1. **Budget**

*(The budget to be prepared in excel using the DE budget template, and then copy pasted as below. The excel budget should be submitted together with the proposal)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Company:***  | [company Name as relevant] |   | LTA# |   |
| ***Evaluation:*** | [Type] evaluation of [subject] |   |
| ***Commissioned by:*** | WFP [commissioning office/unit] |  |
| ***Evaluation Manager:*** | [Name of evaluation manager as per TOR] |  |
| ***Date:*** | [Budget submission date] |   |   |   |   |   |   |
|  |   |   |   |   |   |   |   |
| **1. Evaluation Team Fees** |
| **Name (Function\*)** | **Team Leader**(Function) | **Member 1**(Function) | **Member 2** (Function) | **Member 3**(Function) | **Total number of days/ Sub-total cost US$** |
| **Level of seniority *(Senior, Medium, Junior)*** |   |   |   |   |
| **Daily Rate\*\*-->** |  -  |   |   |   |
| **Phase 3 - Inception**  | Days | Days | Days | Days |   |   |   |
| Team orientation |   |   |   |   |   |
| Desk review of documents |   |   |   |   |   |
| Inception meetings |   |   |   |   |   |
| Prepare draft Inception Report (IR) |   |   |   |   |   |
| Revise draft IR Based on QS feedback |   |   |   |   |   |
| Finalize draft IR based on stakeholder comments |   |   |   |   |   |
| **Total days** |  -  |  -  |  -  |  -  |  -  |
| **Total cost US$** |  -  |  -  |  -  |  -  |  -  |
| **Phase 4 - Collect and Analyse Data** |   |   |   |   |   |   |
| Prepare field work |   |   |   |   |  -  |
| Conduct field work and preliminary analysis |   |   |   |   |  -  |
| End of fieldwork debriefing |   |   |   |   |  -  |
| **Total days** |  -  |  -  |  -  |  -  |  -  |
| **Total cost US$** |  -  |  -  |  -  |  -  |  -  |
| **Phase 5 - Reporting** |   |   |   |   |   |   |   |
| Prepare draft Evaluation Report (ER) |   |   |   |   |  -  |
| Revise draft ER Based on QS feedback |   |   |   |   |  -  |
| Finalize draft ER based on stakeholder comments |   |   |   |   |  -  |
| **Total days** |  -  |  -  |  -  |  -  |  -  |
| **Total cost US$** |  -  |  -  |  -  |  -  |  -  |
| **TOTAL number of days (full team)** |  |  |  |  **-**  |
| **Grand Total Evaluation Team Fees (US$)** |  |  |  |  **-**  |
| \* from the functions listed in the LTA; \*\* Applying LTA rates per function |
| **2. International Travel Costs (Economy Class & most-economical-route)** |
| **Person Name** | **Route** | **# Flights** | **Fare / Flight** | **Total US$** |
|  |   |  -  |  -  |  -  |
|  |   |   |   |  -  |
|   |   |   |   |  -  |
|   |   |   |   |  -  |
| **Total International Travel Costs** |  -  |
|  |  |  |  |  |  |  |   |
| **3. Per Diem Costs (DSA)** |
| **Person Name** | **Place Name** | **# Nights** | **Rate / Night** | **Total US$** |
|   |   |   |   |  -  |
|   |   |   |   |  -  |
|   |   |   |   |  -  |
|   |   |   |   |  -  |
|   |   |   |   |  -  |
| **Total Per Diem Costs** |  -  |  |  |  |  |  |   |
|  |  |  |  |  |  |  |   |
| **4.Local Travel Costs [*Evaluation country/district*]** |
| **Person(s) Name** | **Transportation/Route** | **Unit** | **# Units** | **Rate/Unit** | **Total US$** |
|  | **Example:** |  |   |   |  -  |
|  | *Internal flights (route)* | *# Flights* |   |   |  -  |
|   | *In-country vehicle, driver and fuel* | *# Days* |   |   |  -  |
|   | *Other transportation (train, bus)* | # *Tickets* |   |   |  -  |
|   |   |   |   |   |  -  |
| **Total Local Travel Costs** |  -  |
| **5. Other Direct Costs** |
| **Cost type** | **Unit** | **# Units** | **Rate / Unit** | **Total US$** |
| ***Examples:*** |  |   |   |  -  |
| *Quality assurance (not to exceed 3 days)\** | *Days* |   |   |  -  |
| *[Country] visas* | *People* |   |   |  -  |
| *[Language] translation services* | *Days* |   |   |  -  |
| *Workshop/meeting venue and other costs - if relevant* | *Days and Persons* |  |   |   |  -  |
| *In-country vehicle, driver and fuel* | *Days* |   |   |  -  |
| **Total Other Direct Costs** |  -  |
| **GRAND TOTAL** | **US$** |  |

# Acknowledgement

We, [NAME OF SUPPLIER], hereby confirm that we shall be able to conduct the requested evaluation during the period specified in the TOR (specify start and end date) under the terms of the LTA number [XXX].As such, this proposal is bound by the rates, terms and conditions of the LTA and, once agreed, will become an addendum to this LTA.

Proposal valid until: XXX (a minimum period of 2 weeks and maximum of 4 weeks is recommended)

**Name of the Supplier’s Authorised Representative:**

***Signature Date***

1. WFP is committed to recruiting gender balanced and culturally diverse evaluation teams. [↑](#footnote-ref-1)