



Registration Form for Service Providers



I. BASIC CONTACT INFORMATION

Company/Individual Name:			
Contact Person:			
Full Address:			
Phone No:		Fax No:	
E-mail:		Website:	

II. BUSINESS DETAILS

1. Is your firm registered with the government?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2. Annual Turnover (Rs.); as per the last audited Annual Report		
3. Indicate how long have you been in the similar nature of business		
4. Indicate your Specialisation area in which you provide services		
5. Have you ever done business with other development sector organizations? If so, provide the names below		

III. CUSTOMER REFERENCES

Provide 3 client references below (*listing client name, phone number, contact person, contact's e-mail*) having been engaged in similar services:

1	Name of Organization			
	Name of Contact Person		Title	
	E-mail:		Phone:	
	Contract Period		Contract Value	
2	Name of Organization			
	Name of Contact Person		Title	
	E-mail:		Phone:	
	Contract Period		Contract Value	

3	Name of Organization			
	Name of Contact Person		Title	
	E-mail:		Phone:	
	Contract Period		Contract Value	

IV. CHECKLIST

List of documents to be enclosed along with the application form:

Sr#	Documents	√ or X
1	Covering Letter (limit the words to 200): Include your expertise/ capability and other aspects which you want to highlight	
2	Company's Profile (limit the words to 200) : Your track Record, Experience in the Region/State	
3	Last Audited Annual Return of your organization.	
4	Attach the copy of similar service engagement with other clients. (with reference to point# III)	
5	CVs of your potential team who will be working on this assignment.	
6	Awards & Recognitions, if any.	

V. Agencies to fill up the checklist below (with reference to the scope of services):

Sr#	Scope of Services	√ or X
1	Basic services of an office set up – esp. Workstations, class rooms, meeting hall, connectivity and other facility services including security etc.	
2	Travel solutions (all modes)	
3	Administrative services including office hardware, communication services etc	
4	Arranging conferences & customised catering services	
5	Publishing and printing services	
6	Placement services	
7	Any other (pl specify)	

VI. CERTIFICATION

I certify that the above mentioned particulars are true and complete to the best of my knowledge and belief and that no material changes have occurred to the business which would affect any of the above representations.		
Name of Person Completing Form		
Designation:	Signature:	Date: