## **Expression of Interest (EOI)**

IIE invites application for empanelment of Service Provider having prior experience in arrangement of training setup for conducting Skill Development Training as follows:

- 1. Assistance in Pre-training activities like mobilization of candidates
- Arrangement of training hall with proper seating arrangement and basic facilities like water, electricity, toilet, etc.
- 3. Arrangement of training equipment for conducting practical training
- 4. Arrangement of raw materials for the training programme
- 5. Arrangement of refreshment for the participant
- 6. Data Entry of participants, uploading of feedback, photographs etc.

The above arrangements are to be made in the training locations and trade as follows:

| SI NO | State  | Location, District  | Trade / Job Role      | Batch Size |
|-------|--------|---------------------|-----------------------|------------|
|       |        |                     |                       |            |
| 1     | Sikkim | Kabi Lunchok, North | Organic Soap and Skin | 30         |
|       |        | Sikkim              | Care Products Making  |            |
|       |        | 0 1 1               | 0 10 101              | 20         |
| 2     |        | Gangtok             | Organic Soap and Skin | 30         |
|       |        |                     | Care Products Making  |            |
|       |        |                     |                       |            |
| 3     |        | Chuba, Namthang,    | Felted Toy            | 30         |
|       |        | South District      | Manufacturing         |            |
|       |        |                     |                       |            |

Interested organization may submit their EOI documents comprising of the application form in prescribed format to the following address on or before 21-06-2024 super scribe the envelope as "EOI for Empanelment of Service Provider for various project under IIE at Sikkim" with trade name or email at <a href="mailto:iieesdp30@gmail.com">iieesdp30@gmail.com</a> and copy to <a href="mailto:iietender2021@gmail.com">iietender2021@gmail.com</a> with the subject line "EOI for Empanelment of Service Provider for various project under IIE at Sikkim"

## Address:

To,

The Administrative Officer,
Indian Institute of Entrepreneurship,
Basistha Chariali, N.H. 37 Bypass,
Near Games Village, Lalmati,
Guwahati – 781029



Contact for Tender Filling and Documentation

Mob No.: +91 - 9630030343 Helpline: - 18008892553 Email ID:- proposal@tenderstime.com Website:- www.tenderstime.com

## **Application Form**

| Application for the position of Master Trainer under various project of IIE |   |                        |                            |                     |  |  |  |  |
|---|---|------------------------|----------------------------|---------------------|--|--|--|--|
| Trade:  |   |                        |                            |                     |  |  |  |  |
| Location:   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
| 1.  | Name of the Applicant (IN BLOCK LETTERS): |                        |                            |                     |  |  |  |  |
|   | A. Address:                               |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   | B. Contact Number:                        |                        |                            |                     |  |  |  |  |
| 2   | C. Email:                                 |                        |                            |                     |  |  |  |  |
| 2.  |   |                        |                            |                     |  |  |  |  |
|   | 3. PAN Card and GST no (If applicable)    |                        |                            |                     |  |  |  |  |
| 4.  | Experience in organizing training         |                        |                            |                     |  |  |  |  |
|   | Sl No                                     | Name of the training / | No of person trained       | Date and year of    |  |  |  |  |
|   |   | trade                  |                            | organizing training |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
| 5. Any other information:   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
| Signature (with seal)   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
| Full Name (In BLOCK letters):   |   |                        |                            |                     |  |  |  |  |
|   | ,   |                        |                            |                     |  |  |  |  |
| Designation:  |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        |                            |                     |  |  |  |  |
|   |   |                        | Contact for Tender Filling | and                 |  |  |  |  |



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