

CALL FOR APPLICATIONS UNDER GFATM FOR SHORTLISTING AS NON GOVERNMENT PRINCIPAL RECIPIENTS

The India Country Coordinating Mechanism (CCM) for the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria (GFATM) requests applications from organizations interested in being short-listed as Non Government Principal Recipients to submit Comprehensive Country Proposals for HIV, Tuberculosis and Malaria with Government Principal Recipients to the Global Fund for funding period April, 2021-March, 2024.

The India CCM has defined priority areas for the HIV, Tuberculosis and Malaria disease components which are available in public domain on www.india-ccm.in ; www.mohfw.gov.in ; www.tbcindia.gov.in ; www.naco.gov.in and www.nvbdc.gov.in along with Application Template. Identified priority areas are indicative only. Applicants are encouraged to demonstrate their understanding of the gaps and suggest innovative strategies. Applications will be shortlisted by screening committee of India CCM based on organizational strength and technical strength of proposal.

The application in the prescribed format along with supporting documents is to be submitted to the India CCM Secretariat electronically and in hard copy (both). The electronic copy should be sent at the email id iccmsect-mohfw@gov.in and the hard copy at the following address in person or via speed post–India CCM Secretariat office, Room No. 527-C, Nirman Bhawan, New Delhi-110011 (Ph. No.-011-23061547)

The last date for submission of application to the India CCM Secretariat is **21st February 2020**. Please note that applications submitted later than this date will not be accepted.

Application No.

(For Official use)

Expression of Interest

Application for shortlisting of Non-Government Principal Recipients for the Global Fund to Fight HIV, Tuberculosis and Malaria (GFATM) grant for period 2021-2024

Application under the component	HIV/AIDS	<input type="checkbox"/>	Tuberculosis	<input type="checkbox"/>	Malaria	<input type="checkbox"/>
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SECTION 1- BACKGROUND INFORMATION

Name of applicant organization	
Type of organization/institution (Company/Society/Trust/Others)	
If Consortium, please indicate number of organization	
Date of registration with statutory authorities	
Registration at Darpan Portal under NITI Aayog	<input type="checkbox"/> Yes <input type="checkbox"/> No
Registered under FCRA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
List the States where your organization/institution is active	
Turnover of previous three financial years as per certified statements of accounts	2016-2017
	2017-2018
	2018-2019
Brief description of maximum three projects undertaken in the past three years including experience in handling donor projects	

Details of available resources		
Number and type of trained personnel on regular payroll of organization		
Existing offices in the proposed project area		
Give a brief description of the governing structure of the organization (Board of Directors and composition, Executive Committee etc.)		
Availability of external audits over the last three years and date of the last audit	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, date of the last audit/.../..... Name and address of the Audit Company:	
Were there any quality concerns in the last audit report? If yes, list the major financial and managerial audit qualifications	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, specify: -	
Existing linkages/network with other organizations (mention if they will participate in the delivery of the proposal)		
Contact information for the Applicant/Lead organization of the Consortium		
Name	Primary Contact	Secondary Contact
Title		
Mailing Address		
City and Sate		
Telephone		

Mobile		
Fax		
E-mail address		
Organization Website		

If Consortium, please give details of all the organization

Contact information for the other member organizations of the Consortium			
Organization- 1			
Name of the Organization		Mailing address	
Contact person		City and State	
Title		Telephone	
Mobile		Fax	
Organization Website		E-mail address	

Organization- 2			
Name of the Organization		Mailing address	
Contact person		City and State	
Title		Telephone	
Mobile		Fax	
Organization Website		E-mail address	

Note: Please add more columns, if required.

SECTION 2- DETAILS OF PROPOSED PROJECT

This should not be more than 5 pages. Please use font Arial font size-11

2.1 Title of proposed Project

2.2 Geographical Area to be covered by Project

2.3 Background (Clearly indicate current situation, gaps, weaknesses, inequalities and present efforts to meet these gaps, weaknesses and inequalities in not more than 10-12 lines)

2.4 Objectives (State objectives and purpose of the proposal in not more than 7-8 lines)

2.5 Target Population (Describe the target population for your proposal in not more than 5 lines)

2.6 Methodology (Please describe specific activities required to employ to achieve the objectives including partnerships with private sector, if applicable. Briefly describe coordination mechanisms between implementers, in not more than two pages)

2.7 Monitoring and Evaluation framework (Briefly outline how you propose to monitor and evaluate the project, in not more than ½ page)

2.8 Self assessment of the applicant organization (Please indicate the strengths- including managerial skills, MIS system and system of internal controls of the

organization that makes it best suited to implement the project in not more than 8-10 lines)

2.9 Equitable Access (Describe how principle of equity will be ensured in your proposal specially gender equity, support to marginalized populations and key affected populations etc. in not more than 8-10 lines)

2.10 Linkages to Grants from the Global Fund and Other Donors (Please explain how this project is linked to other funding you are currently receiving from the Global Fund or other donors if applicable. Also indicate if you are implementing Targeted Interventions or other Government programmes in not more than 5 lines)

2.11 Sustainability (Indicate how the services outlined in your proposed project could be sustainable at the end of the proposal period in not more than 8-10 lines)

2.12 Risks and its management including Financial Risk Management (Briefly outline the major internal and external risks and how you propose to reduce or avoid such risks in not more than 8-10 lines).

SECTION 3-PROJECT BUDGET :

3.1 Budget Breakdown by Source (This table is intended to clarify part of the budget you already have (Provided by the organization), the part of the budget financed by other

donors (Provided from other sources) and part of the budget from Global Fund (Requested from the Global Fund)

Table 3.1 Budget, by source (in USD)

Source	Year (1)	Year (2)	Year (3)	Total
Provided by the organization				
Provided from other sources (indicate the source)				
Requested from the Global Fund				
Total Budget				

(*Conversion rate of 1 USD to INR = 70 INR may be used. Please note that conversion rate for final funding application submission to the Global Fund will be as per their guidelines)

3.2 Budget Breakdown by Cost Category (The total budget shown in Table 3.2 should equal the total budget shown in Table 3.1)

Table 3.2 Budget by cost category (In USD)

Source	Year (1)	Year (2)	Year (3)	Total
Human resources				
Technical Assistance				
Training				
Health products and Health Equipment (including laboratory products and equipment)				
Medicines and pharmaceutical products				
Procurement and Supply management costs Infrastructure and other equipment				
Others (specify)				

(*Conversion rate of 1 USD to INR = 70 INR may be used. Please note that conversion rate for final funding application submission to the Global Fund will be as per their guidelines)

3.3 Describe why your proposed project cannot be financed under current mechanisms within the NACP, NTEP or NVBDCP?