Invitation for Proposals (to be issued by UNFPA)

UNFPA, United Nations Population Fund, an international development agency, invites qualified organizations to submit proposals for the **Partnership for Advancing Sexual and Reproductive Health and Rights and Gender Equality**. The purpose of the Invitation for Proposals is to identify eligible non-governmental organizations for prospective partnership with UNFPA India Country Office to support achievement of results outlined in the 2023-2027 DP/FPA/CPD/IND/10 or section 1.3 below.

Organizations that wish to participate in this Invitation for Proposals are requested to send their submission through email or mail clearly marked "NGO Invitation for Proposals" at the following address UNFPA India Country Office: **bids.india@unfpa.org**

By **18 November 2026, 23:59 hours IST.**

Proposals received after the date and time may not be accepted for consideration.

Applications must be submitted in English.

Any requests for additional information must be addressed in writing by **28 October 2026, 23:59 hours IST** at the latest to Operations Manager, ***bids.india@unfpa.org***. UNFPA will post responses to queries or clarification requests by any NGO applicants who submitted, through emails to the concerned parties before the deadline for submission of applications.

UNFPA shall notify applying organizations whether it is considered for further action.

Please see Working with UN System: Key Information for UN Implementing Partners on Completing the Protection from Sexual Exploitation and Abuse (PSEA) Capacity Assessment.

Section 1: Background	
1.1 UNFPA mandate	UNFPA is the United Nations sexual and reproductive health agency. UNFPA is the lead UN agency for delivering a world where every pregnancy is wanted, every birth is safe, and every young person's potential is fulfilled.Our mission is to accelerate progress on ending preventable maternal deaths, ending unmet need for family planning and ending all forms of Gender Based Violence and Harmful Practices.
1.2 UNFPA Programme of Assistance in India Country office (250 Words)	In the India Country Office, UNFPA works with the government and other partners to achieve the overall goal of the 2023-2027 DP/FPA/CPD/IND/10. Further information on the programme can be found on http://unfpa.org/India
1.3 Terms of Reference	**A. Background and Rationale** UNFPA works in partnership with the Government of India and State Governments to advance sexual and reproductive health and rights, gender equality, adolescent and youth development and the use of population and demographic evidence for development planning.

In Rajasthan, UNFPA works with State Government departments and institutions, district and local systems, civil society and other stakeholders to strengthen policies, institutions, systems and programme delivery.

In Rajasthan, UNFPA works closely with key state government departments- Medical, Health and Family Welfare; Women Empowerment; Education; Panchayati Raj; Social Justice and Empowerment; Police; Tribal Area Development; and the State Youth Board- to strengthen programmes related to SRHR, gender equality, and adolescent and youth development. In addition to its state-level engagement, UNFPA has a presence in 4 priority districts - Sawai Madhopur, Udaipur, Jodhpur and Jaisalmer, and extends support to other districts based on specific intervention needs.

UNFPA serves as the technical lead partner in the development and implementation of the State Policy for Women and the Youth Policy, and as the lead development partner for Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) in the state.

UNFPA will continue to provide technical assistance and strategic support to the Government of Rajasthan in advancing key flagship programmes and initiatives, including RMNCH+A, Mission Parivar Vikas, Surakshit Matritva Aashwasan (SUMAN), Rashtriya Kishor Swasthya Karyakram (RKSK), the School Health and Wellness Programme (SHWP), efforts to prevent child marriage, Menstrual Health and Hygiene Management (MHHM), Beti Bachao Beti Padhao (BBBP), Women- and Girl-Friendly Gram Panchayats (WGFGPs), gender-responsive policing, survivor-centred responses to Gender-Based Violence (GBV), and the development of model One Stop Centres (OSCs). Through these partnerships, UNFPA will continue to strengthen institutional capacities, promote gender equality, advance the rights and well-being of women, girls and young people especially the ones left furthest behind, and support the effective implementation of gender-responsive, youth-focused and rights-based policies and programmes across Rajasthan.

The partnership approach combines policy and technical assistance at State level with institutional capacity strengthening and implementation support at district and community levels. Particular emphasis is placed on strengthening Government systems and institutions, reaching populations at risk of being left behind, generating and using evidence, building sustainable institutional capacity and supporting approaches that can be replicated or scaled through Government systems.

Rajasthan presents significant opportunities as well as continuing challenges in advancing sexual and reproductive health and rights and gender equality.

The Government of Rajasthan is implementing key initiatives to advance sexual and reproductive health and rights (SRHR), improve maternal health and family planning (FP) outcomes, address Gender-Based Violence (GBV) and harmful practices, and promote gender equality. Key initiatives include Mission Parivar Vikas, midwifery services, Beti Bachao Beti Padhao (BBBP), One Stop Centres

(OSCs), Mahila Suraksha Salah Kendras (MSSKs), Pannadhyay Suraksha Salah Kendras (PSSKs), and the State Strategy and Action Plan for a Child Marriage-Free Rajasthan. While these efforts provide an important foundation, persistent challenges call for accelerated and coordinated action.

Rajasthan's total fertility rate has declined to 2.1; however, NFHS-6 (2023–24) reports an unmet need for family planning of 7.9%. Adolescent pregnancy has increased from 3.7% in NFHS-5 to 4.7% in NFHS-6. The reported decline in modern contraceptive prevalence from 62.1% to 52.1%, alongside increased reliance on traditional methods, further underscores the need to expand access to quality contraceptive services, promote informed reproductive choices, and strengthen adolescent-responsive SRHR information and services.

As per the Sample Registration System (SRS), Rajasthan's maternal mortality ratio (MMR) declined from 141 per 100,000 live births in 2017–19 to 87 in 2022–24, marking substantial progress. However, it remains above the SDG target of less than 70 per 100,000 live births by 2030. Sustaining progress will require continued improvements in the quality, accessibility and continuity of essential maternal health services. Recurrent droughts, water scarcity and extreme heat pose additional risks to maternal and newborn health, highlighting the need to strengthen climate-resilient health systems.

NFHS-6 reports that 24.6% of women aged 20–24 in Rajasthan were married before the age of 18, while more than one in five ever-married women aged 18–49 have experienced spousal violence. These findings underscore the need to intensify efforts to address child marriage, strengthen survivor-centred GBV response mechanisms, improve access to support services, and engage communities in transforming discriminatory social norms.

Strengthened partnerships between the Government of Rajasthan, UNFPA and other stakeholders can build on existing initiatives through technical assistance, institutional capacity-building, evidence-based planning and community engagement. An integrated approach that advances reproductive choice, improves maternal and newborn health, promotes gender equality, prevents violence and harmful practices, and addresses climate-related vulnerabilities is essential to accelerating progress and achieving equitable, resilient and sustainable outcomes for women, girls, adolescents and young people across Rajasthan.

UNFPA's engagement in the State increasingly requires a combination of high-quality technical expertise, strong relationships with Government systems, field-level implementation capacity, evidence generation, monitoring and knowledge management, and the ability to translate policy and programme innovations into sustainable institutional practice.

As UNFPA plans its programme implementation arrangements from 2027 onwards, there is an opportunity to strengthen the partnership architecture supporting its work in Rajasthan.

The intention is to establish a pool of technically competent, operationally capable and institutionally sound partner organisation(s) that can support different components of the programme according to their respective comparative advantages.

Accordingly, this IFP allows organisations to apply for one or more programme areas. UNFPA may select different organisations for different programme areas and/or geographic areas depending upon technical expertise, institutional capacity, operational presence, programme requirements and availability of resources.

This approach is intended to enable specialised technical expertise, effective programme delivery, appropriate geographic reach and resilient implementation arrangements.

B. Objective: The overall objective is to support UNFPA and its Government partners in Rajasthan to accelerate progress towards improved sexual and reproductive health and rights including maternal health, family planning and comprehensive SRH services, SRH information and services for adolescents and youth, gender equality, prevention and response to gender-based violence and harmful practices (child marriage and gender biased sex selection) and promote inclusion of persons with disabilities in SRHR programmes and services.

The specific objectives are as follows:

1. Strengthen institutional and programme capacities of State and district systems;
2. Support effective implementation of evidence-based programmes and innovations;
3. Improve access, quality, equity and responsiveness of relevant services and programmes;
4. Strengthen capacities of Government institutions, service providers, frontline functionaries and community platforms;
5. Generate, analyse and use evidence for programme improvement, policy development and scale-up;
6. Strengthen mechanisms for reaching vulnerable, marginalised and underserved populations;
7. Support documentation, knowledge management, communication and dissemination of programme results; and
8. Contribute to sustainable institutionalisation and scale-up of successful approaches through Government systems.

C. Scope of Work: Applicants may submit proposals under one or more of the following programme areas.

Programme Area A: Sexual and Reproductive Health and Rights and Health Systems

A.1 Maternal Health and Quality of Care

- Strengthen the quality and respectful delivery of maternal and reproductive health services, including climate-resilient care and heat-sensitive pregnancy services.
- Strengthen institutional capacity for quality assurance and continuous quality improvement.
- Strengthen referral, review and response mechanisms to address preventable maternal morbidity and mortality.
- Promote evidence-based approaches to reduce preventable maternal morbidity and mortality, including risks associated with heat and pregnancy.
- Build the capacity of health institutions and service providers to deliver quality, climate-resilient maternal health care.

A.2 Family Planning and Reproductive Choice

- Strengthen access to a comprehensive range of contraceptive choices including long-acting and permanent contraceptive methods (LAPM) and newer contraceptives (Inj. DMPA-SC, Implants), wherever available;
- Strengthen postpartum family planning (PPFP), particularly by addressing missed opportunities at institutional delivery.
- Improve quality of family planning counselling and services ensuring informed choice and a rights-based approach;
- Strengthen district and facility-level programme implementation;
- Address inequities in access and utilisation;
- Supporting demand generation, community engagement and male engagement in family planning, where appropriate
- Support in building capacities of service providers on DVDMS to strengthen FP supply chain including addressing stock-out and expiry of FP commodities

A.3 Midwifery and Health Workforce Capacity

- Support strengthening and institutionalisation of midwifery, including the deployment, mentoring and institutionalisation of Nurse Practitioners in Midwifery (NPMs) in alignment with Government standards.
- Strengthen the capacity of health personnel through structured training and capacity development.
- Strengthen midwifery training institutions and systems, as per the midwifery roadmap of Rajasthan;
- Supporting monitoring , supportive supervision and quality improvement mechanisms.

A.4 Health-System Strengthening

- Technical and implementation support to State and district health systems;
- Strengthen programme management, monitoring and review mechanisms for data-driven planning, service delivery and monitoring;

- Develop/adapt technical tools, protocols and training resources;
- Support convergence across relevant health programmes and institutions;
- Strengthen institutional capacities for sustainable programme delivery.
- Strengthen programmes through capacity building, knowledge management and other interventions for promoting health-sector response to GBV and harmful practices.

A.5 Evidence, Monitoring and Knowledge Management

- Programme monitoring and analysis;
- Documentation of innovations and good practices;
- Implementation research and assessments;
- Development of knowledge products;
- Supporting evidence-based programme adaptation, replication and scale-up.

Indicative Indicators :

- Percentage of health facilities in UNFPA-supported priority districts providing comprehensive SRH services.
- Percentage of postpartum women in supported districts accepting a family planning method.
- Percentage of supported public health facilities providing at least five reversible contraceptive methods, including newer methods where available.
- Number of trained MEs deployed in NMTI/SMTI and MLCUs in high delivery load facilities

Programme Area B: Gender Equality, Gender-Based Violence and Harmful Practices

B.1 Prevention and Response to Gender-Based Violence

- Strengthening institutional mechanisms and systems for prevention and response to GBV and harmful practices such as child marriage;
- Strengthening gender responsiveness of public institutions such as One Stop Centres, Mahila Suraksha Salah Kendra (MSSK), health systems, Panchayati Raj Institutions;
- Capacity development of service providers and institutions;
- Strengthening referral and coordinated response mechanisms through standardized protocols, convergence programmes, capacity-building, monitoring, mentoring and evidence generation;
- Supporting survivor-centred approaches;
- Strengthening quality, accountability and convergence across relevant institutions.
- Development and institutionalisation of training resources, and protocols;
- Supporting institutional mechanisms for sustained gender-responsive practice.
- Support in effective implementation of programmes and policies such as Rajasthan State Women Policy through capacity building, assessments, convergence programmes, etc.

- Support development of Women and Girl Friendly Gram Panchayat through advocacy and convergence programmes, promoting gender-responsive planning and budgeting, evidence generation, and other such initiatives.

B.2 Harmful Practices (child marriage and gender biased sex selection)

- Prevention of child marriage and other harmful practices through rights-based approaches;
- Strengthening development pathways and comprehensive rehabilitation service for girls affected by child marriage through institutional engagement, capacity building, relavant stakeholder mapping and engagement, pilot demonstration, and other initiatives ;
- Strengthening prevention, referral and response systems towards addressing child marriage and gender-biased sex-selection;
- Engagement with adolescents, families, communities and relevant institutions;
- Evidence generation and documentation of effective approaches.

B.3 Gender-Transformative Programming

- Promoting gender-transformative programming across all levels of engagements in programmes on addressing GBV and harmful practices.
- Promoting gender-equitable attitudes, behaviours and practices among the service providers, institutions and stakeholders engaged in addressing GBV and harmful practices.
- Engaging men and boys on promoting gender equality, positive masculinity and engaging them as change agents to transform discriminatory norms.Explore platforms such as Mybharat, NCC or other such platforms for at-scale sustainable interventions.
- Strengthening adolescent empowerment within government programmes through life-skills education, linkages with development services, and engagement of adolescents as change agents to transform discriminatory social norms.
- Building the capacity of civil society organisations (CSOs) and relevant stakeholders to prevent and respond to gender-based violence (GBV), address harmful practices, and promote equitable gender and social norms
- Strengthening women's and girls' agency and participation in programme designing and implementation;
- Developing and testing scalable gender-transformative approaches.

B.4 Evidence, Monitoring and Knowledge Management

- Evidence generation and foresight analysis on megatrends including changing population structures for informing programmes and policies related to addressing GBv and harmful practices
- Research and programme assessments;
- Monitoring of programme results;
- Documentation of good practices and innovations;
- Development of knowledge and communication products;
- Supporting dissemination, replication, scale-up and sustainability.

Indicative Deliverables

- Number of service providers trained to strengthen survivor-centred GBV response, case management and referral mechanisms.
- Number of community-based initiatives implemented to address child marriage, gender-biased sex selection and discriminatory gender norms.
- Number of gram panchayats strengthened on gender-responsive planning, budgeting and women's participation.
- Number of evidence products, technical guidance documents or institutional resources developed or disseminated to strengthen gender equality, GBV prevention and response, or addressing harmful practices.

D. Cross-Cutting Functions and Expected Capabilities

D.1 Government Partnership and Institutional Engagement

- Ability to work effectively with State and district Government departments, institutions and systems, while maintaining the standards of accountability, neutrality and integrity expected of a UNFPA implementing partner.

D.2 Programme Implementation and Field Presence

- Demonstrated capacity to implement programmes at State, district and/or community level in Rajasthan, including appropriate staffing, supervision, logistics and operational systems.

D.3 Technical Assistance and Capacity Development

- Ability to provide high-quality technical inputs and design and deliver capacity-development initiatives for Government institutions, service providers and other stakeholders.

D.4 Monitoring, Evaluation and Data

- Capacity to establish programme monitoring systems, analyse programme data, track results and use evidence for adaptive programme management.

D.5 Financial and Operational Management

- Sound financial-management systems, internal controls, procurement processes, documentation and reporting systems capable of managing UN and/or donor-funded programmes.

D.6 Safeguarding and PSEA

- Appropriate institutional systems for safeguarding and prevention of sexual exploitation and abuse, including policies, reporting mechanisms, training, investigation and corrective-action arrangements.

D.7 Knowledge Management and Communication

- Capacity to document results, produce high-quality knowledge products and communicate programme learning appropriately.

D.8 Rapid Mobilisation and Programme Continuity

- Ability to mobilise appropriate personnel and operational arrangements within agreed timelines and ensure continuity of implementation.

D.9 Leave No One Behind

- Demonstrated capacity to design and implement inclusive, gender-responsive programmes that address intersecting vulnerabilities and respond to the diverse needs of adolescents, young people, women and girls, particularly those from marginalised communities and populations furthest left behind.

E. Indicative Results and Outputs

- **Result 1:** Strengthened State and district institutions and systems for delivery of high-quality, equitable and rights-based sexual and reproductive health services.
- **Result 2:** Strengthened institutional mechanisms and capacities for prevention and response to gender-based violence and harmful practices and advancement of gender equality.
- **Result 4:** Strengthened capacities of Government institutions, service providers, frontline workers and community platforms on quality SRH, response to GBV and harmful practices, transforming discriminatory norms and promoting Human Rights based approach.
- **Result 5:** Improved generation and use of programme evidence, data and learning for programme improvement, policy development, replication and scale-up.
- **Result 6:** Effective implementation, monitoring, financial management and reporting of agreed UNFPA-supported interventions.
- Specific outputs, indicators, baselines, targets and activities will be agreed through subsequent workplanning with selected partner(s).

F. Geographic Coverage

The partnership will have statewide coverage across Rajasthan, with a focus on UNFPA priority districts- Udaipur, Sawai Madhopur and Jaisalmer. Depending upon programme priorities, individual workplans may include State-level technical and institutional support; implementation in selected districts; support to Government institutions and facilities; community-level interventions in identified geographic areas; and/or technical support with State-wide application.

Specific geographic coverage will be determined through annual workplanning based on programme needs, Government priorities, available resources and the operational capacity of the selected partner(s).

G. Applicants should clearly indicate:

- Current operational presence in Rajasthan;
- Districts in which they presently operate;
- Expertise of working in underserved geographies - specifically districts with concentrated tribals, migrant or minority populations.
- Existing offices/infrastructure in the State;
- Relevant Government partnerships and existing work across SRHR and Gender & Human Rights;
- Capacity to expand to additional districts, if required; and
- Expected time required for mobilisation.

H. Duration and Partnership Arrangements

The initial partnership/workplan is expected to cover 2027, subject to availability of resources and completion of applicable UNFPA procedures.

Based on programme requirements, satisfactory performance, availability of resources and applicable UNFPA policies and procedures, selected organisation(s) may be considered for subsequent workplans.

The competitive process may also contribute to establishing a pool or partnership architecture capable of supporting implementation during the subsequent Country Programme period. Selection under this IFP, however, does not constitute a commitment to partnership or funding beyond an approved workplan period.

UNFPA may:

- select one or more organisations;
- select different organisations for different programme areas;
- select an organisation for only part of the programme area for which it applied;
- determine geographic coverage based on programme requirements;
- enter into partnership subject to satisfactory due diligence and applicable UNFPA procedures; and
- modify the scope and level of engagement according to programme priorities and availability of resources.

I. Eligibility and Selection Criteria

I.1 Legal and Institutional Status

- Be legally registered and authorised to operate in India;
- Have a valid legal status and required statutory registrations;
- Be compliant with applicable laws and regulatory requirements;
- Have appropriate governance and oversight arrangements;
- Be able to enter into a partnership agreement with UNFPA.

I.2 Technical Capacity

- Demonstrated technical experience relevant to the programme area(s) applied for, preferably including experience in SRHR/public health; gender equality/GBV/harmful practices; and/or related institutional and systems-strengthening programmes.

I.3 Rajasthan Experience and Government Engagement

- At least 3 years of relevant programme experience in Rajasthan;
- Established operational capacity in the State;
- Experience working with State and/or district Government institutions;
- Understanding of Rajasthan's institutional and programme context.

I.4 Programme Management Capacity

- Appropriate programme-management systems;
- Qualified technical and programme personnel;
- Monitoring and reporting systems;
- Ability to manage State- and district-level implementation;
- Capacity to mobilise personnel and operational arrangements within agreed timelines.

I.5 Financial Management and Internal Controls

- Sound financial-management systems;
- Appropriate segregation of financial responsibilities;
- Internal controls and oversight;
- Appropriate procurement and asset-management systems;
- Capacity to maintain supporting documentation;
- Experience managing institutional/donor funding;
- Timely financial reporting and audit compliance.

I.6 Governance, Institutional Integrity and Disclosure

- Governance structure and members of the governing body;
- Senior management structure;
- Related entities, affiliates, societies, trusts, cooperatives, companies or other organisations with which the applicant has material governance, management or financial relationships;
- Material financial transactions with related entities;
- Any actual or potential conflicts of interest relevant to the proposed partnership;
- Any material ongoing litigation, regulatory proceedings, investigations or other matters that could materially affect the organisation's capacity to fulfil its obligations under a UNFPA partnership.

I.7 Safeguarding and PSEA

- Applicants should demonstrate appropriate organisational capacity for prevention of sexual exploitation and abuse and safeguarding, consistent with UN requirements.

	I.8 Previous UN/Development Partner Experience ● Experience implementing programmes supported by UN agencies, Government, bilateral/multilateral agencies, foundations or other institutional donors will be considered an advantage. Such disclosure will form part of UNFPA's due-diligence and partnership assessment and will not, by itself, constitute grounds for exclusion.

Section 2: Application requirements and timelines		
2.1 Documentation required for the submission	The expression of interest shall include the following documentation: ● Copy of provisions of legal status of the NGO in India [*Required to be eligible for review]* ● Attachment I – NGO Profile and Programme Proposal ● Latest annual report and audit report as separate documents or hyperlink to the documents	
2.2 Indicative timelines	Invitation for Proposal issue date	**14 October 2026**
	Deadline for submissions of proposals	**18 November 2026, 23:59 hours IST**
	Deadline for requests of additional information/ clarifications	**28 October 2026, 23:59 hours IST**
	Review of NGO submissions	**19 November - 18 December 2026**
	Notification of results communicated to NGO	**31 December 2026**

Section 3: Process and timelines		
3.1 Review & evaluation of NGO submissions	Applications will be assessed by a review panel to identify organizations that have the required knowledge, skills, and capacity to support achievement of results *using criteria outlined in section 3.2 below*. It should be noted, however, that participation in this Invitation for Proposals does not guarantee the organization will be selected for partnership with UNFPA. Selected NGOs will be invited to enter into an implementing partner agreement and applicable UNFPA programme policy and procedures will apply.	
3.2 Selection criteria	Eligible organizations will be selected in a transparent and competitive manner, based on their capacity to ensure the highest quality of service, including the ability to apply innovative strategies to meet programme priorities in the most efficient and cost-effective manner. UNFPA India Country Office will review evidence provided by the NGO submission and evaluate applications based on the following criteria: NB: Any proposal not submitted in specified working language will be excluded from consideration.	
	Governance & Leadership	● The organization has a clearly defined mission and goals that reflect the organization's structure and context, as well as alignment to UNFPA priority areas. ● Organization does not have a history of fraud, complaints or service delivery issues.
	Human Resource	● Organization has sufficient staff resources and technical expertise to implement the proposed activities.

		● Organization does not have conflicts of interest with UNFPA or its personnel that cannot be effectively mitigated.
	Comparative Advantage	● The organization's mission and/or strategic plan focuses on at least one of the UNFPA's programme areas. ● The organization has experience in the country or field and enjoys prominence in areas related to UNFPA's mandate. ● The organization has a proven track record in implementing similar activities and is seen as credible by its stakeholders and partners. ● The organization has relevant community presence and ability to reach the target audience; especially vulnerable populations and hard-to-reach areas.
	Monitoring	● The organization has systems and tools in place to systematically collect, analyse and use programme monitoring data
	Partnerships	● The organization has established partnerships with the government and other relevant local, international and private sector entities.
	Environmental Considerations	● The organization has established policies or practices to reduce the environmental impact of its activities. If no policies exist, the organization must not have a history of its activities causing negative impact to the environment.
3.3 Prospective partnership agreement	UNFPA will inform all applicants of the outcome of their submissions in writing to the email indicated in the NGO submission.	

Attachment I: NGO Profile and Programme Proposal (To be completed by NGO submitting proposal)

The purpose of this proposal is to provide the following information: a) overview of the NGO, b) an outline of the activities the NGO is proposing to partner with UNFPA and c) provide UNFPA with sufficient evidence to show it meets the criteria outlined in section 3.2 of the IFP. [*If the Invitation for Proposals allows for multiple submissions, the following text may be added:* A separate form should be filled for each programme proposal submitted.]

Information provided in this form will be used to inform the review and evaluation of NGO submissions as outlined in the Invitation for Proposals.

Section A. NGO Identification		
A.1 Organization information	Organization name	
	Address	
	Website	
A.2 Contact information	Name	
	Title/Function	
	Telephone	
	Email	
	Are you registered in the United Nations Partner Portal? [1]	
A.3 Conflict of interest statement	To your knowledge, do any staff members of your organization have personal or financial relationships with any staff of UNFPA, or any other conflicts of interest with this programme or UNFPA? If so, please explain.	
A.4. Fraud statement	Does your organization have fraud prevention policies and practices in place?	

Section B. Overview of the organization		
B.1 Annual budget	Size of annual budget (previous year, USD)	
	Source of funding	*Outline funding base, including local, international, and private sector donors*

[1] Please be sure to self-identify under the governance profile question in the UN Partner Portal if you are a women, indigenous, refugee or youth led organization.

	Main funding partners/ donors	
B.2 Staff capacity	*List of number and key functions of core organization staff*	

B.3 NGO mandate and background	*Outline the organization's mandate and field of work, and how it aligns to UNFPA's mandate.*
B.4 Available expertise and specialists	*Outline the distinctive technical capacity of the organization to achieve results in the proposed programmatic area*
B.5 Experience in proposed area of work	*Outline of type/scope and key results achieved in proposed programmatic area in recent years, including any recognition received at local / global level for the work in the proposed area. Include a summary experience in [India] and prior experience with any organization of the United Nations*
B.6 Knowledge of the local context/ Accessibility to target population	*Outline of presence and community relations in the location(s) the activities will be implemented in: include access to vulnerable populations and hard-to-reach areas, if any)*
B.7 Credibility	*To what extent is the NGO recognized as credible by the government, and/or other key stakeholders/partners?*
B.8 Monitoring	*Outline the systems in place (policies, procedures, guidelines, and other tools) that systematically collect, analyse and use programme monitoring data*

Section C. Proposal overview	
C.1 Programme title	
C.2 Results to which the programme contributes	*Refer to Section 1.3 of the Invitation for Proposal*
C.3 Proposed programme duration	*From MM/YYYY to MM/YYYY*
C.4 Proposed Programme budget	

Section D. Proposed interventions and activities to achieve intended results	
D.1 Programme Summary	*This section should provide a brief summary of the programme.* *It should include a problem statement, the context and the rationale for the Programme:* ● *Overview of the existing problem;* ● *How the problem is linked to global/regional/national priorities and policies; and*

	• *The relevance of the programme in addressing problem identified*
D.2 Organizational background and capacity to implement	*This section should briefly explain why the proposing organization has the experience, capacity and commitment to successfully implement the workplan.*
D.3 Expected results	*"What" this programme will achieve - programme objectives and expected results*
D.4 Description of activities and budget	*This section includes a detailed description of budgeted activities to be undertaken to produce the expected results. Clear linkages between activities and results must be indicated. The applicant should include a separate excel spreadsheet with full details of activities and associated budget.*
D.5 Gender, Equity and Sustainability (optional)	*Explain briefly the practical measures taken in the programme to address gender, equity and sustainability considerations*
D.6 Environmental impact	*Outline the likely environmental impact of the programme, if any.*
D.7 Other partners involved	*This section outlines other partners who have a role in programme implementation, including potential sub-contractees and other organization providing technical and financial support for the programme*
D.8 NGO contribution	*This section briefly outlines the partner specific contribution to the programme (monetary or in-kind)*
D.9 Additional documentation	*Additional documentation can be mentioned here for reference*

Section E. Programme Risks and Monitoring	
E.1 Risks	*Identify major risk factors that could result in the proposed activities not being successfully implemented and any key assumptions on which the proposed intervention is based. Include any actions the organization will undertake to address/reduce identified risk(s).*
E.2 Monitoring	*This section briefly outlines the monitoring activities*

Section F. References	
Please provide 3 references to support your proposal. Include name, title, contact information and brief summary of relationship.	
Reference 1:	
Reference 2:	
Reference 3:	

Section G. Preventing Sexual Exploitation and Abuse (PSEA) Capacity Assessment Please note, the results of this assessment may be shared with other United Nations entities
Please note: The PSEA Assessment must be completed in the UN Partner Portal. The questions below are simply for reference.

G.0 Preliminary Screening	Does the organization have direct contact with beneficiaries? Yes ☐ No ☐ If your response is no, stop here and do not complete this section. However, please note if your organization begins working with beneficiaries at a later date, UNFPA will require your organization to fill out a self-assessment. If yes, please continue.
	Has the organization's PSEA capacity been assessed by a UN entity in the last 5 years? Yes ☐ *If yes, share the assessment rating and supporting documentation with UNFPA and do not complete this section.* No ☐ *If no, complete G.1 through G.8*
G.1 Policy Requirement	*Please provide supporting documentation for any fields marked "Yes".* Your organization has a policy document on PSEA. At a minimum, this document should include a written undertaking that the partner accepts the standards of conduct listed in section 3 of the ST/SGB/2003/13. Yes ☐ No ☐ Supporting documentation may include: • Code of Conduct (internal or interagency) • PSEA policy • Documentation of standard procedures for all personnel to receive/sign PSEA policy • Other (please specify):
G.2 Subcontracting	Your organization's contracts and partnership agreements include a standard clause requiring sub-contractors to adopt policies that prohibit SEA and to take measures to prevent and respond to SEA. Yes ☐ No ☐ *N/A ☐ Supporting documentation may include: • Contracts/partnership agreements for sub-contractors • Other (please specify): ** Please Note: If the partner notes that it does not have subcontractors in the self-assessment this core standard is not applicable and UNFPA will assess this core standard as N/A. However, if this situation changes and the same partner subsequently subcontracts activities to another entity, this would warrant a re-assessment.*

G.3 Recruitment	Your organization has a systematic vetting procedure in place for job candidates through proper screening. This must include, at minimum, reference checks for sexual misconduct and a self-declaration by the job candidate, confirming that they have never been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to SEA, or left employment pending investigation and refused to cooperate in such an investigation. Yes ☐ No ☐ Supporting documentation may include: • Reference check template including check for sexual misconduct (including reference from previous employers and self-declaration) • Recruitment procedures • Other (please specify):
G.4 Training	Your organization holds mandatory trainings (online or in-person) for all IP employees and associated personnel[2] (herein "personnel") on PSEA and relevant procedures. The training should, at a minimum include: 1) a definition of SEA (that is aligned with the UN's definition); 2) an explanation on prohibition of SEA; and 3) actions that personnel are required to take (i.e. prompt reporting of allegations and referral of victims). Yes ☐ No ☐ Supporting documentation may include: • Training package • Attendance sheets • Training certificates • Other (please specify):
G.5 Reporting	Your organization has mechanisms and procedures for personnel, recipients of assistance and communities, including children, to report SEA allegations that comply with core standards for reporting (i.e. safety, confidentiality, transparency, accessibility). Yes ☐ No ☐ Supporting documentation may include: • Internal Complaints and Feedback Mechanism

[2] Associated personnel include sub-contractors, consultants, interns or volunteers and others associated with or working on behalf of the Partner.

	• Participation in joint reporting mechanisms • Communication materials • PSEA awareness-raising plan • Description of reporting mechanism • Whistle-blower policy • Other (please specify):
G.6 Assistance	Your organization has a system to refer SEA victims to locally available support services, based on their needs and consent. This can include actively contributing to in-country PSEA networks and/or GBV systems (where applicable) and/or referral pathways at an inter-agency level. Yes ☐ No ☐ Supporting documentation may include: • Internal or Interagency referral pathway • List of Available service providers • Description of referral or Standard Operation Procedure (SOP) • Referral form for survivors of GBV/SEA • Guidelines on victim assistance and/or training on GBV and GBV case management principles • Other (please specify):
G.7 Investigations	Your organization has a process for investigation of allegations of SEA and can provide evidence. This may include a referral system for investigations where in-house capacity does not exist. Yes ☐ No ☐ Supporting documentation may include: • Written process for review of SEA allegations • Dedicated resources for investigation(s) and/or commitment of partner for support • PSEA investigation policy/procedures • Contract with professional investigative service • Other (please specify):

G.8 Corrective Measures	Your organization has taken appropriate corrective action in response to SEA allegations, if any. Yes ☐ No ☐ N/A ☐ Supporting documentation may include: • Evidence of implementation of corrective measures identified by the UN partner entity, including capacity strengthening of staff. • Specific measures to identify and reduce risks of SEA in programme delivery. • Other ((please specify):