

### Format of Expression of Interest (EoI)

#### 1. Scope of work and organisation

- (i) The broad scope of work or service (briefly in about 100 words)
- (ii) Type of Inputs to be provided by NITI Aayog on the subject
- (iii) Eligibility of the consultant(s) for the study

| Type of organisation    | Address of Organisation | Registration no. as per NGO portal of NITI Aayog | Samavesh Partner/Chair professor unit/ other | Single or Joint or collaboration (Name of all organisations) | Whether blacklisted by Govt of India/ State Govt/any Other department* |
|-------------------------|-------------------------|--|--|--|--|
|                         |                         |  |  |  |  |
| *If so, details thereof |                         |  |  |  |  |

#### 2. Required Documents:

- (i) Copy of Registration Certificate of the Institution/Organisation **OR** Articles of Association {Copy of the Constitution/MOA (Memorandum of Association) of the Institute/ Any letter issued by UGC if University }
- (ii) Registration number (Copy) in NGO-Portal “Darpan” of NITI Aayog, if applicable.
- (iii) Photo copy of PAN card of the organisation.

3. **Undertaking:** "The [Institute/ Organisation/University (name only)] has not obtained or applied for assistance for the same purpose/activity for .....[Name of study] from any Ministry/Department of Central Government / State Governments. It is solely depending on the assistance of NITI Aayog". [To be given separately on A4 size paper]

#### 4. Information of PI and Organisation

| Details of Bidder |  |
|-------------------|--|
| 1                 | Name of the Principal Investigator (PI)  |
| 2                 | Address of PI  |
| 3                 | Status of the Organisation (Public Ltd./ Pvt. Ltd./ NGO/ Society/ Trust/ University/ Autonomous Body/ Deemed University) |
| 4                 | Status as per Registration certificate/ Act  |
| 5                 | Name and Designation of the contact person/ PI and Co-PI to whom all communication shall be made                         |
|                   | Telephone No. (with STD code)  |
|                   | Mobile Number  |
|                   | Email of the Contact/ key person   |
|                   | Fax No. (with STD code)  |
|                   | Website:   |

Name and Signature of the Principal Investigator (PI)

Name and Signature of the Head of the Institution  
/ Registrar (if university) /Principal (if college)

Date:

Official Seal

Place: