

**REQUEST FOR PROPOSAL (RFP)**

<b>RFP #:</b>	<b>Technical Evaluation Lead for the Evaluation of Integrated Health and Nutrition Service Delivery Activities in Eastern Mali</b>
<b>Services Requested:</b>	<b>Evaluation of integrated health and nutrition service delivery activities in Eastern Mali</b>
<b>Contract Type:</b>	<b>Fixed Price contract</b>
<b>Issuance Date:</b>	<b>November 22<sup>nd</sup>, 2024</b>
<b>Deadline for Proposals Submissions:</b>	<b>December 16<sup>th</sup>, 2024</b>
<b>Anticipated Award Date:</b>	<b>TBD</b>
<b>RFP Contents and Attachments</b>	<ol style="list-style-type: none"> <li><b>1. Introduction</b></li> <li><b>2. Scope of Work &amp; Background</b></li> <li><b>3. Instruction to Bidders</b></li> <li><b>4. Technical and Financial Proposal Evaluation</b> <ul style="list-style-type: none"> <li>• <b>Annexes</b> <ul style="list-style-type: none"> <li>➤ <b>Attachment A- Small Business Certification Form</b></li> <li>➤ <b>Attachment B- Proposal Cover Page</b></li> </ul> </li> </ul> </li> </ol>

### **Corus Procurement Ethics**

Corus International and its family of organizations are committed to a transparent and ethical procurement process aiming to achieve the best value for money, fairness, integrity, and doing business in compliance with the US government regulations, the beneficiaries, donors, and partners' interests.

Corus does not allow accepting any monetary transaction, gratuity, or compensation of any type from current or potential vendors or suppliers in exchange for or as a reward for a business. Therefore, all potential vendors and suppliers taking part in this solicitation must not offer fraud, bribery, or kickback to an employee or staff of Corus. Any vendor or supplier violating these standards will be automatically disqualified for doing business with Corus in the future.

A comprehensive list of Corus's ethical standards as well as information on how to report any violation pertaining to this solicitation (Corus's Integrity and Ethics Reporting Hotline) is found here: <https://corusinternational.org/ethics-and-policies-corus-international>.

#### **1- INTRODUCTION:**

Lutheran World Relief is a member of Corus International. Corus International combines over 150 years of experience of our non-profit and for-profit subsidiary organizations – IMA World Health, Lutheran World Relief, CGA Technologies, Ground Up Investing, and Farmers Market Brands. Together, the organizations take a systematic approach to grow rural economies, eliminate extreme poverty, ensure access to quality healthcare, and respond to urgent humanitarian needs in fragile settings.

Corus leads an ensemble of social impact organizations working together in the world's most fragile settings to deliver the holistic, lasting solutions needed to overcome the interconnected challenges of poverty, health care access and climate change. Corus is a new model in the international space, creating a consortium of specialized non-profit and for-profit entities for greater impact. Our annual budgets have ranged between \$110-130 million a year. Additional growth is expected.

#### **2- SCOPE OF WORK & BACKGROUND**

Childhood malnutrition remains a major global health problem, leading to morbidity, mortality, and disability. It includes an array of nutritional disorders like being underweight, wasting, stunting, and micronutrient deficiency (WHO, 2024). According to the World Health Organization (WHO), around 45% % of deaths for children than 5 years of age are linked to undernutrition, with most occurring in low- and middle-income countries (WHO, 2024).

In mid-2023, conflict-induced displacement of nearly 330,000 people across in northern and central Mali contributed to a worsening food security crisis, with Level 3 (Crisis) to Level 4 (Emergency) Integrated Food Insecurity Classifications (IPC) assigned to Gao and Timbuktu respectively from June to October (IPC, 2024). This contributed to surging malnutrition across Mali including 313,185 cases of Severe Acute Malnutrition (SAM) and 1.1 million cases of Moderate Acute Malnutrition (MAM) among children aged 6 – 59 months recorded in June 2023

and projected through May 2024 (IPC, 2024). SAM and MAM rates rose to 15.3% of all children aged 6 – 59 months in Gao region alone (FEWS NET 2024). Moreover, agricultural production dropped in northern and central Mali due to insecurity and limited access to fertilizers. Market access disruptions, including blockades, decreased commercial flows, resulted in shortages and price hikes of staple foods.

## Project Intervention

Lutheran World Relief (LWR), an international non-government organization under Corus International, secured a 12-month “fast-track relief” grant from the Bill & Melinda Gates Foundation to help to address the crisis. LWR launched the project in November 2023 with its Malian Fédération des Unions des Sociétés Coopératives des Producteurs de Riz (FUSC) partner in Mopti to provide seed vouchers for smallholder farmers. In Gao and Timbuktu, LWR partnered with local social service organization, Association for Development of the Northern Part of Mali (ADENORD) to provide fortified flour to malnourished children, and food vouchers to families of children diagnosed with MAM and SAM without complications. The Gao and Timbuktu response also included safe hygiene promotion sessions and other nutrition training for mothers. LWR leveraged the USAID-supported MOMENTUM Integrated Health Resilience (MIHR) project, led globally by IMA World Health (LWR’s affiliate organization under Corus International) and led in Mali by JSI, Inc. to strengthen capacities of regional health services and health facilities to deliver and maintain a continuum of quality care for Reproductive Health (RH), MNCH, and child nutrition services in complex humanitarian contexts. Specifically, the MIHR team in Mali requested that LWR’s response project fill supplemental nutrition food gaps in 11 health facilities treating MAM and SAM children in Gao and Timbuktu. At the time of the project launch, the health facilities were experiencing stock outs of therapeutic food.

Between March and July 2024, 2,704 families of children with MAM in Gao and Timbuktu received fortified flour for complementary feeding at the targeted health facilities. Of those targeted for receipt of flour, 2,382 families also received vouchers to purchase beans, milk, sugar, oil, rice, millet and vegetable seeds in local markets.

## Evaluation Objectives

LWR’s emergency response project goal was to contribute to improved food security and enhanced nutrition of populations living in the regions of Gao, Timbuktu, and Mopti. With Gates Foundation support. LWR proposes to evaluate integrated emergency and routine nutrition services in MIHR-supported health facilities in Gao and Timbuktu to explore the effectiveness of the emergency response intervention that leveraged the USAID development project.

Objective 1: The **primary objective** of the evaluation is to estimate key treatment outcomes, according to the Sphere standards of program quality (Sphere Project, 2018), of the LWR supplementary feeding intervention. The **primary outcome** of interest is the recovery rate among children 6-59 months of age in the program receiving outpatient treatment for Moderate Acute Malnutrition (MAM) at the 11 MOMENTUM Integrated Health Resilience supported facilities in the Gao and Timbuktu Districts, Mali. Moderate Acute Malnutrition for this age group is based on

admission criteria and is defined as a weight for height z score between  $\geq -3$  and  $< -2$  or Middle Upper Arm Circumference (MUAC) between 115 and 125 mm with an absence of edema (Ministere de la Sante et du Developpement Social du Mali; WHO, 2024).

**Secondary outcomes under objective 1** to be evaluated are the death rate (an indicator of quality of care) and the default rate (an indicator of acceptability and accessibility) among children 6-59 months of age receiving outpatient treatment for Moderate Acute Malnutrition in the 11 MIHR supported facilities.

Objective 2: A **secondary objective** is to better understand the reasons families/care givers returned or did not return with their children for recommended follow up appointments once diagnosed with MAM and enrolled in the LWR intervention. This will provide more in-depth information on the acceptability and accessibility of the nutrition care they received and help determine if the LWR emergency intervention influenced families' decisions to seek care (or not) at a health facility.

## Evaluation Design

This evaluation will employ primarily an observational study design using retrospective record review (RCR). Qualitative data, via Key informant interviews (KIIs), will be collected to supplement quantitative data obtained through the RCR.

## Evaluation Site

The evaluation will be conducted using MAM patient data from 11 health facilities supported by MIHR in the Gao (6 facilities) and Timbuktu (5 facilities) Districts. The facilities represent urban and peri-urban localities. Facility names and characteristics are presented in Table 1.

Table 1. MIHR-supported facilities and characteristics

Health Facility Name	District	Catchment Population (est.)	Locality Type
Boulgoundje	Gao	11,019	Urban
Bagoundje	Gao	8,571	Peri-urban
Aljanabandja	Gao	26,536	Urban
Château	Gao	20,630	Urban
Sossokoira	Gao	24,035	Urban

Wabaria	Gao	14,504	Peri-urban
Bellefarandi	Timbuktu	30,092	Urban
Kabara	Timbuktu	9,245	Urban
Hondoubomo Koina	Timbuktu	10,504	Peri-urban
Toya	Timbuktu	4,008	Peri-urban
Sankoré	Timbuktu	59,395	Urban

## Proposed Methods

A Senior Technical Monitoring, Evaluation, Learning, and Research Advisor at Corus International developed a preliminary evaluation design (below) that is subject to review and modifications by the successful applicant.

### Objective 1: Estimating Treatment Outcomes

#### *Patient Register/Record Review*

Data on both primary and secondary treatment outcomes of interest will be obtained from patient registers filled out by, and maintained at, the health facilities where fortified flour was distributed. While databases exist with important information for reporting on other project indicators (ex. number of children receiving supplemental flour), they do not contain detailed information on child treatment outcomes. Patient registers/medical records are the only current source of this information (see Appendix 1 for facility register form). A structured data abstraction tool will be developed and used for data collection purposes. The data abstraction tool will be based on the Experienced local data collectors/record reviewers (likely doctors, nurses, and/or public health officers) will be hired to extract required data from patient and facility records and enter it into an Excel database for analysis purposes. This database will be developed in collaboration with the LWR project partner, MOMENTUM Integrated Health Resilience (MIHR), which has expertise in digital database development and facility-based nutrition data. A detailed Standard Operating Procedure for data extraction and entry will also be developed to include processes for obtaining records from facilities, ensuring confidentiality of records/data, handling missing data in individual patient records.

Outcomes will be assessed against SPHERE standards for the management of MAM and include the following:

- Recovery rate: Above 75%. Patients are considered recovered if they have achieved a

weight for height Z score  $\geq -1.5$  for two consecutive visits and/or MUAC  $\geq 125$  mm for two consecutive visits.

- Default rate: <15%: Patients are considered to default if they miss 2 consecutive visits (Note: Default rates are an indicator of accessibility and acceptability of services.)
- Death rate: <3%

**The consultant will be required to assess all the outcomes of interest above, as these have been agreed upon with the donor.**

### **Sampling and Preliminary Sample Size Estimates**

For the expected prevalence of 75% recovery rate (minimum acceptable recovery rate according to Sphere standard for MAM), the required sample size is 318 children 6-59 months of age with MAM for the margin of error or absolute precision of  $\pm 5\%$  in estimating the prevalence with 95% confidence. With this sample size, the anticipated 95% CI is (70%, 80%). This sample size is calculated using the Scalex SP calculator (Naing L, et. al., 2022) using the basic formula:

$$n = (z^2) P(1-P)/d^2$$

Where n=sample size, z= statistic for the level of confidence, P=expected prevalence and d=allowable error. The sample size also accounts for a 10% missing data rate to account for patient records missing key data.

Registers/records of all registered MAM patients ages 6-59 months at the 11 facilities during the intervention period will be enumerated (listed and names entered into Excel) and a random sample of 318 then drawn using the random sample generator in Excel. That sample will be assigned unique identification numbers (so that patient names are not included in the evaluation database). Relevant register data for those 318 children will be extracted and entered into the database.

**Note: The successful applicant will be expected to review the sample size estimates and calculations and provide written recommendations to Corus International on any suggested modifications.**

### **Contextual Data/Variables**

Other important data/variables that could affect treatment outcomes will be considered during data analysis and results interpretation. These include stock out rates for nutrition supplies in the 11 facilities, shocks and stresses occurring in the districts during the intervention period (ex. conflict, drought, population displacement), seasonality of the intervention, and co-morbidities of the children receiving MAM treatment (Sphere Project, 2018). Availability, quality, and relevance of these data to the primary outcome(s) of interest, will be determined in consultation with the technical evaluation lead and country-based project team. See Annex 1 for sample data collection

forms used at the health facilities to capture some of these additional data.

**Objective 2: Understanding motivations for MAM patient follow up visits in MIHR-supported facilities.**

**Key Informant Interviews (KIIs)**

Primary caregivers (usually mothers) of MAM patients in the 11 MIHR facilities that were part of the LWR emergency response project will be recruited to participate in interviews to better understand healthcare seeking attitudes, perceptions, and behaviors. Of particular interest is whether the assurance of receiving flour and food vouchers served as motivation to attend follow-up visits. LWR and MIHR project staff in Mali will assist in identifying and recruiting potential interview participants. Qualitative data will supplement the quantitative data on default rates. Exact content of the follow-up interviews will be decided by the Evaluation Team as part of full protocol development. Sampling for the interviews will be purposive to meet the following sampling frame (Table 2). Because the project operates in more facilities in Gao, more KIIs will be conducted in that district. Attempts will be made to get representation from caregivers of children from each of the 11 facilities. Final sample size for the KIIs will be based on budget, time, and data saturation considerations. Note: data on caregiver demographics such as age, wealth, and education levels is not routinely collected at facilities. Therefore, those variables are not included in our sampling frame.

Table 2. Suggested Sampling frame and sample size: KIIs

District	Characteristics	Proposed number of KIIs
Gao	Male child urban	5
	Female child urban	5
	Male child peri-urban	5
	Female child peri-urban	5
Timbuktu	Male child Urban	4
	Female child Urban	4
	Male child Peri-urban	4
	Female child Peri-urban	4

		Total: 36
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**Note: The successful applicant will be expected to review the suggested sampling frame for the KIIs and provide written recommendations to Corus International on any suggested modifications.**

### **Data Analysis**

It is expected that general descriptive statistics (frequencies and medians/interquartile range [IQR]) will be calculated for patient characteristics (ex. age in months, sex) and distribution of outcomes of interest. Pearson's chi-square, Fisher's exact, or nonparametric equality of medians tests (depending on data type) may be used to assess differences in patient characteristics and outcomes. Qualitative data will be analyzed using a matrix analysis approach (Averill, 2002) to identify codes and generate themes using deductive and inductive analyses. Matrix analysis enables the identification of associations and patterns across time using a visual template. **A comprehensive data analysis plan will be developed by the Lead Technical Evaluator/successful applicant.**

### **Ethics and Data Security**

The Technical Evaluation Lead will oversee the development and submission a full protocol for review by the ethics committee (ERC) of the Ministry of Health in Mali and the JSI Institutional Review Board (the designated project IRB) in the United States. Corus and JSI, Inc evaluation team members will assist the Evaluation Lead with IRB/ERC submission logistics. Each study team member will have certifications in protection of human subjects in research from either the Collaborative Institutional Training Initiative (CITI) program or equivalent. All data collectors (interviewers and record reviewers) will receive training in how to facilitate interviews that may elicit sensitive information and how to protect confidentiality. All consent forms and study instruments will be translated into local languages and made available in the language preferred by the participant.

### **Dissemination**

Results, recommendations, and lessons learned will be shared via multiple channels including a stakeholder workshop in Mali, webinars, Corus online platforms, and a technical product (ex. peer reviewed journal manuscript or technical brief). **The TEL is expected to contribute technical inputs to the stakeholder workshop but will not be required to attend in person.**

### **Proposed Evaluation Team**

The Technical Evaluation Lead will oversee and/or collaborate with the following team members at Corus International and JSI, Inc.:

1. Data collectors/record reviewers (consultants): Local data collectors from Mali will be



hired by Corus or their designated sub-awardee (JSI, Inc) to review and extract data from patient records. The data collectors will be medical or public health professionals (ex. doctors or nurses), with experience in nutrition programming and reporting. **The day-to-day work of the data collectors will be supervised directly by in-country JSI, Inc. and/or Corus International staff, but the Evaluation Lead will provide remote technical guidance on data collection.**

2. Database developer/data collection supervisor (JSI, Inc): Working closely with the Evaluation Lead consultant, he will develop the evaluation database, train data collectors on data entry, oversee data collection in the facilities and coordinate protocol submission with the Mali Ethics Review Committee.
3. Other Corus/LWR staff: LWR’s emergency response program manager in Mali and the Senior HQ or regional based Monitoring, Evaluation, Research Learning Technical Advisor will provide support to the Evaluation Lead.

The TEL will hold biweekly virtual check-ins (at a minimum) with the in-country project team and the Sr. Technical Advisor for MERL at Corus HQ for the duration of the consultancy. The TEL will be responsible for developing check-in agendas with clear meeting objectives to ensure efficient meetings.

**Evaluation Timeline**

Activities	Responsible Party(s)	Dec	Jan	Feb	Mar	Apr	May	Jun
Review relevant project documents, develop full protocol, including data collection tools, data analysis plan, and consent form	TEL	X	X					
Submit to IRB(s) and receive approvals	TEL in collaboration with Corus and JSI		X	X				
Develop project database	JSI, Inc with oversight from Evaluation Lead		X	X				
Data collection training	JSI, Inc with oversight from TEL			X				
Data collection	JSI, Inc with oversight from TEL			X	X			
Data cleaning and analysis	TELL				X	X		

Develop draft report	TEL					X	X	
Hold a dissemination workshop for local/regional stakeholders training	Corus International and JSI Inc, with contributions from the TEL						X	
Draft a technical brief based on report findings	TEL in collaboration with Corus International						X	X

**Expected Deliverables and Schedule (all deliverables must be in English)**

Activity	Deliverable product(s)	Timeline
<b>Conduct desk review of existing documents (evaluation proposal, LWR project documents, peer reviewed literature) and make written recommendations for changes to evaluation design.</b>	Inception report (not to exceed 4 pages)	Within 1 week of contract signature
<b>Draft full evaluation protocol for submission to IRBs</b>	Draft protocol that includes data collection tools and consent forms	Within 2 weeks of contract signature
<b>Incorporate Corus feedback on draft protocol and finalize evaluation protocol for submission</b>	Final protocol	Within 4 weeks of contract signature
<b>In collaboration with the Corus and JSI evaluation team, develop logistical data collection plan/Terms of reference for facility-based data collection/extraction and KIIs</b>	Data collection plan	Within 2 months of contract signature
<b>Clean and finalize quantitative data set, including a codebook and creation of composite variables</b>	Cleaned data sets in CSV format and/or Stata files, Stata .do files, codebook	Within 3.5 months of contract signature

<b>Clean and finalize qualitative data</b>	KII interview notes/files and recordings	Within 4 months of contract signature
<b>Data analyzed and draft report developed that includes background, methods, results</b>	Draft report (not to exceed 25 pages including data tables); Stata (or similar) .do files from analyses	Within 5 months of contract signature
<b>Incorporate feedback from Corus international and finalize report</b>	Final report (not to exceed 25 pages including data tables)	Within 5.5 months of contract signature
<b>Draft technical brief based on final report</b>	Draft technical brief (not to exceed 10 pages)	Within 6 months of contract signature

**Consultancy Management:** The TEL will report to the Senior Technical Advisor: MERL (for technical matters) and the Senior Program Manager for West Africa at Corus International (for administrative matters).

**The Technical and Cost Proposals should be submitted together in a clearly marked PDF file and all documents shall be submitted in English.**

The written Technical Proposal should not exceed 15 pages and must contain the following information:

### **TECHNICAL PROPOSAL**

**Required Information for vendor and/or consultant**

- Individual consultant name, address, email and phone
- Length of time for the validity of the proposal

**Proposal for the provision of services**

- A general description of the Offeror’s qualifications and experience as they relate to the requested qualification enumerated above, including experience with similar assignments.
- A response that clearly describes the Offeror’s understanding of the services required and the Offeror’s approach to performing the evaluation described.

**Past Performance**

Please complete the following table with past performance references for the last three years for similar work

performed:

Organization Name	Address	Name & Contact Info	Scope of Services

**COST PROPOSAL**

- The Offeror is to provide quotes for the services to be provided. The quote should be provided in an excel spreadsheet that shows the detail of all the cost proposed. Quotes are to be provided in U.S. dollars;
- VAT, if applicable, should be quoted separately from the total price;
- Quotes must include validity of prices, no less than 90 days;
- The Offeror must disclose in the proposal any legal or regulatory actions pending against the Offeror;
- The Offeror must clearly specify all terms of payment, and preference will be given to monthly or quarterly payments as opposed to advance payments.

**INCURRING COSTS**

Corus International is not liable for any cost incurred during preparation, submission, or negotiation of an award for this RFP. The costs are solely the responsibility of the potential offeror

A technical writing sample must be included to be considered for this consultancy. The writing sample can be a technical report or a peer reviewed journal article **with the consultant as the lead author.**

Preferred Qualifications and Competences:

Technical Evaluation Lead (TEL)

- Master’s degree in public health, Sociology, Demography, or similar field; PhD preferred
- Demonstrated experience (at least 6 years) conducting mixed methods evaluations of donor-funded health projects (ex. USAID, UN agencies, FCDO, the Bill and Melinda Gates Foundation, etc.) in sub-Saharan Africa; nutrition expertise highly desired.
- Advanced Quantitative research/evaluation expertise
- Advanced quantitative data analysis/statistical analysis expertise
- Experience leading research or evaluation studies and teams remotely
- Experience in the use of health facility records in research or evaluations
- Oral and written French and English proficiency required

**3- INSTRUCTIONS TO BIDDERS**

**RFP:** This RFP constitutes an invitation to prospective Bidder(s) (“Bidder”) to submit proposals (“Proposal”) for the services described herein. It consists of (1) Cover Page, (2) Overview, (3) Scope of Work (4) Instructions for Bidder(s).

**NOTIFICATION OF INTENT:** Each prospective Bidder(s) receiving a copy of this RFP shall, within 2 days, email an intention to submit or not to submit a proposal addressed to [Procurement@corusinternational.org](mailto:Procurement@corusinternational.org).

All Proposals must be in the English language, signed and dated by an authorized employee of the Bidder. In addition to require documents requested, proposals can include additional items such, i.e., templates, brochures, media, etc.

The proposal must include:

In order to be considered, the proposals must be received by email to the RFP contact email [Procurement@corusinternational.org](mailto:Procurement@corusinternational.org) **no later than 5pm December 16<sup>th</sup>, 2024.**

Bidders are solely responsible to ensure the timely receipt of their proposals. Proposals received after the date and time required will, generally, not be considered unless no other proposals are received.

Prospective Bidders are under no obligation to prepare or submit proposals in response to this RFP and do so solely at their own risk and expense. Corus will not reimburse any costs incurred related to this RFP.

Proposals may not be altered or corrected after the Date of Receipt, except when Corus at its sole discretion, may permit correction of arithmetic errors, transposition errors, or other clerical or minor mistakes, in cases in which Corus deems that both the mistake and the intended proposal can be established conclusively on the face of the proposal.

Proposals must be valid for at least **NINETY (90) days** from the Date of Receipt.

In evaluating the proposals, Corus will seek the **best value for money**. Specifically, proposals will be evaluated on the basis of the following:

**4- TECHNICAL AND FINANCIAL PROPOSAL EVALUATION:**

**4.1. Technical**

Evaluation Category	Rating - Points
<p><b>Technical Proposal</b></p> <ul style="list-style-type: none"> <li>• Details and quality of methodology proposed for the assignment.</li> <li>• Comprehensiveness and practicality of the work plan and timeframe.</li> <li>• Demonstrated understanding of the scope of work.</li> </ul>	<p>50</p>

<ul style="list-style-type: none"> <li>Logistic considerations, limitations, and mitigation strategies for limitations.</li> </ul>	
<p><b>Past Experience:</b></p> <ul style="list-style-type: none"> <li>CV of the Team Leader and other key team members (not more than 3 pages per CV)</li> <li>Consultant profile: Experience in similar assignments in the last 7 years, please provide client lists and description of the projects</li> <li>Experience working with international NGOs in conducting health-related assessments</li> </ul>	30
<b>Budget Proposal</b>	20
<b>Total</b>	<b>100</b>

Quality of project approach, proposed strategy and required resources.

Technical Experience– Past experience, preferably experience in the international development sector.

Qualifications- Business licenses, credentials, etc.

#### 4.2. FINANCIAL

Rates for proposed approach to tasks in scope of work at Monthly flat rate for services rendered.

If at any time prior to award Corus deems there to be a need for a significant modification to the terms and conditions of this RFP, Corus will issue such a modification as a written RFP amendment to all competing Bidders. No oral statement of any person shall in any manner be deemed to modify or otherwise affect any RFP term or condition, and no Bidder shall rely on any such statement.

Corus may request additional information to clarify or substantiate information provided in the proposal or may request revisions to the proposed approach or personnel. After selection, Corus will negotiate the award cost with the selected bidder. A contract will be awarded after the selected Bidder undergoes a pre-award survey to assess the selected Bidder’s management capacity and financial capability and after references have been checked.

Corus is not bound to accept the lowest bid or any proposal and reserves the right to accept any proposal in whole or in part and to reject any or all proposals.

Corus shall not be legally bound by any award notice issued for this RFP until a contract is duly signed and executed with the winning Bidder.

**Bidders should provide the following:**

Evidence of Bidder’s legal company registration, incorporation or license to do business issued by a competent authority in the country of registration.

Audited financial statements for the previous fiscal year.

Past Performance references from three previous customers for supply of similar goods/services as included in this RFP. Contact details should be included.

Financial Proposal shall be stated in US Dollars.

All bidders should be registered in SAM and have a UEI number. This information should be submitted to Corus as part of the proposal.

Prior to submission of any protest, all parties shall use their best efforts to resolve concerns raised by an interested party at the contracting officer level through open and frank discussions.

**The following procedures are established to resolve protests effectively:**

(1) Protests shall be concise and logically presented to facilitate review by Corus. Failure to substantially comply with any of the requirements may be grounds for dismissal of the protest.

(2) Protests shall include the following information:

(i) Name, address, and fax and telephone numbers of the protester.

(ii) Solicitation number.

(iii) Detailed statement of the legal and factual grounds for the protest, to include a description of resulting prejudice to the protester.

(iv) Copies of relevant documents.

(v) Request for a ruling by Corus.

(vi) Statement as to the form of relief requested.

(vii) All information establishing that the protester is an interested party for the purpose of filing a protest.

(viii) All information establishing the timeliness of the protest.

(3) All protests will be addressed to the contracting officer or other official designated to receive protests.

Protests based on alleged apparent improprieties in a solicitation shall be filed before bid opening or the closing date for receipt of proposals. In all other cases, protests shall be filed no later than 5 days after the basis of protest is known or should have been known, whichever is earlier.

**4.3. TECHNICAL PROPOSAL OUTLINE**

The Technical Proposal must include the checklist, the following sections (which must be within the page limits set for each section) and attachments.

Section 1: Cover Page	
Section 2: Experience	
Section 3: Proposed Approach	
Section 4: Management-Implementation	
Section 5. Key Personal Resume	
Section 6. Organization Chart	



**ATTACHMENT B. PROPOSAL COVER PAGE**

*[Use this form or create one in this format]*

<b>Name of Organization:</b>	<b>Primary Address:</b>
<b>Contact Name:</b> <i>(must be an individual with the authority to negotiate and enter into a contract)</i>  <b>Title:</b>	<b>Telephone:</b>  <b>Email (at least two):</b>  <b>Website:</b>
<b>Type of Entity: (check one)</b> <input type="checkbox"/> Non Profit <input type="checkbox"/> For Profit <input type="checkbox"/> Other (specify)	<b>Year registered in &lt;INSERT&gt;:</b> <b>UEI # &lt;INSERT</b> <b>SAM Registration Status: &lt;INSERT&gt;:</b>

Authorized Signatory: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Disclosure 1**

**DISCLOSURE AND AUTHORIZATION REGARDING BACKGROUND INVESTIGATION  
FOR CONSULTANT AGREEMENTS**

**Disclosure**

*Corus International (“the Company”)* in the course of the standard Consultant Agreement process, will be requesting background information about you in connection with your engagement for services (including independent contractor or volunteer assignments, as applicable).

This process is conducted through our third-party vendor partner HireRight, LLC. (“HireRight”) will prepare or assemble the background reports for the Company. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, [www.hireright.com](http://www.hireright.com).

The types of background information that may be obtained including but not limited to: terrorist watch list; national sex offender list; social security number verification; and other information.

**Authorization**

I hereby authorize the Company to obtain the information described above about me.

Consultant Name \_\_\_\_\_

Consultant Signature \_\_\_\_\_ Date : \_\_\_\_\_

**Disclosure 2**  
Biodata Salary Form

<b>CONTRACTOR BIOGRAPHICAL DATA SHEET</b>						
1. Name <i>(Last, First, Middle)</i>			2. Contractor's Name			
3. Consultant's Address <i>(include ZIP code)</i>			4. Proposed Rate \$			
5. Telephone Number <i>(include area code)</i>		6. Place of Birth		7. Citizenship <i>(If non-U.S. citizen, give visa status)</i>		
<b>8. EDUCATION</b> <i>(include all college or university degrees)</i>				<b>9. LANGUAGE PROFICIENCY</b>		
NAME AND LOCATION OF INSTITUTION	MAJOR	DEGREE	DATE	LANGUAGE	Proficiency Speaking	Proficiency Reading
<b>10. EMPLOYMENT HISTORY</b> <i>(List last three (3) positions held by the individual)</i>						
POSITION TITLE	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #		Dates of Employment <i>(M/D/Y)</i>			
			From	To		
<b>11. SPECIFIC CONSULTANT SERVICES</b> <i>(give last three (3) years). Continue on a separate sheet of paper, if required, to provide this information.</i>						
SERVICES PERFORMED	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #		Dates of Services and Pay Rate			
			Date of Service	Rate		
<b>12. RATIONALE FOR PROPOSED RATE</b> <i>(Provide the basis for the rate proposed in Block 4 with supporting rationale for the market value of the assignment. Continue on a separate sheet of paper, if required)</i>						
<b>13. CERTIFICATION:</b> To the best of my knowledge, the above facts as stated are true and correct.						
Signature of Consultant					Date	