

Notice for the Request for Proposal (RFP) Portal for Special Projects under PMKVY 4.0 (2023-24) Going Live on 21-Nov-2023

(dated 20/11/2023)

1. Further to the public notice on RFP Special Projects released on 14th November 2023, wherein National Skill Development Corporation (NSDC) ⁽¹⁾ as implementing partner of MSDE for PMKVY 4.0 had solicited proposals for Special Projects under the Pradhan Mantri Kaushal Vikas Yojana 4.0 (PMKVY 4.0) 2023-24.
2. The Request for Proposal (RFP) Portal for Special Projects will accept applications for the next 10 days i.e., till 30th November 2023, 11:59 PM. The link to access the RFP Portal for Special Projects is <https://specialprojectrfp.nsdcindia.org/>. No other form of submission, including hard copy will be entertained.
3. The scheme will be implemented in accordance with Guidelines for PMKVY 4.0 (2023-24) which can be accessed at <https://nsdcindia.org/sites/default/files/PMKVY%204.0%20Guidelines.pdf>. Please go through the Guidelines before applying for Special Projects.
4. For reference, all the Annexures which are required for the Special Projects application are mentioned below. The Annexures are also available on the home page of RFP Portal for Special Projects at <https://specialprojectrfp.nsdcindia.org/>.
5. All stakeholders are strongly encouraged to submit their proposals before the due date. For the latest information and updates regarding this Request for Proposal (RFP), kindly refer to the notices section of both the NSDC <https://www.nsdcindia.org/notice-current> and PMKVY <https://www.pmkvyproject.org/> portals.
6. For any queries, please contact Helpdesk at 8810438183 and 8287234253 ((between 10 AM to 6 PM), or write at targetallocation_pmkvy4@nsdcindia.org .

Issued by:

National Skill Development Corporation (NSDC)

5th & 6th Floors, New Moti Bagh,

New Delhi 110023

Website: www.nsdcindia.org

Reference:

(1) Request for Proposal (“RFP”) for providing Skill Training under PMKVY 4.0(2023-24) Special Projects,

<https://www.pmkvyproject.org/documents/Vg02jFKdaapOWm3xfjSOtnQ4D1k97xkmtPGx5AP>

[2.pdf](#), dated 14th November 2023

Document Formats – Annexures

Annexure -1 Board Resolution Format

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED BY THE BOARD OF DIRECTORS/MEMBERS/TRUSTEES AT ITS MEETING HELD ON THE [●] DAY OF [●], 2021 AT (Address)

“RESOLVED:

THAT the Company/Society/Trust does approach National Skill Development Corporation (hereinafter referred to as the “NSDC”) for PMKVY2023-24 Special Projects Target Allocation (FY2020-21) in response to the Request for Proposal dated (hereinafter referred to as the “RFP”) issued by NSDC.

THAT the detailed Proposal in the prescribed format be duly filled and submitted to NSDC along with all necessary documents.

THAT the following directors/trustees/members/authorized signatories be and are hereby severally authorized to execute the documents, papers, guarantee, declaration, confirmation, affidavit, undertaking, indemnity, contracts and such other instruments/documents as security or otherwise, as may be required by NSDC.

S. No	Name	Designation

THAT copies of the aforesaid resolutions certified to be true be furnished to NSDC”

CERTIFIED TO BE TRUE

For,

(Signature)

Name:

Designation:

Date:

Place:

DIN/PAN:

(Signature)

Name:

Designation:

Date:

Place:

DIN/ PAN:

Annexure 2- Waiver/Flexibility Required for Project Execution

Details of Waiver/ Flexibility:

- a).....
- b).....
- c).....

a)

b)

c)

Explanation for seeking waivers/flexibilities:

Annexure 3- Self-Declaration by Community Based Organization (CBO) pertaining to Vulnerable candidates' proposed for skilling of the organization.

(On the letterhead of the Applicant Entity)

To
National Skill
Development
Corporation, 5th Floor,
Kaushal Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Community Based Organization (CBO)_____will be providing training to the Vulnerable candidates' (Women/ PwD/ Transgender/ SC/ ST/ Others).

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure-4 Details of Special geographies proposed for skilling of the organization.

Link for the list of Special geographies is given below:

https://specialprojectrfp.nsdcindia.org/Downloads/NSDCDocument/ODOP_Industrial_Clusters_and_Special_Geographies_RFP.xlsx

Annexure-5 List of ODOP

Link for the list of ODOP is given below:

https://specialprojectrfp.nsdcindia.org/Downloads/NSDCDocument/ODOP_Industrial_Clusters_and_Special_Geographies_RFP.xlsx

Annexure-6 List of Industry Clusters

Link for the list of Industry Clusters is given below:

https://specialprojectrfp.nsdcindia.org/Downloads/NSDCDocument/ODOP_Industrial_Clusters_and_Special_Geographies_RFP.xlsx

Annexure 7- Self-Declaration by Project Implementing Agency (PIA)

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Company/ firm _____ will be the Project Implementing Agency (PIA).

We further declare that the trainees of the proposed project will not be the current employees of our company/ firm _____.

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: *In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.*

Annexure 8- Self-Declaration by Industry/MSME/Start-Up/Association pertaining to placement to be provided to certified candidates.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Company/ firm _____ will be providing captive placement/ placement to greater than or equal to 75% certified candidates. And the details are given below:

S. No.	State	District	Sector	Job Role	Job Role Type (Preferred Future/Other Future/Regular)	Number of candidates to be provided captive placement/ placement
1.						
2.						

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure 9- Self-Declaration by Industry/MSME/Start-up/Association pertaining to expected salary offered to certified candidates.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Company/firm _____ will be offering expected salary of Rs. 20,000 & above to greater than or equal to 70% certified candidates.

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure 10- Self-Declaration by Industry Association pertaining to associated member organizations.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Association _____ have _____ number of member organizations associated with us. And the details of the member organizations are given below:

S. No	Name of Organization	Website Link of the organization	Name of the Head of organization	Contact Number of the Head of Organization	Email Address of the Head of Organization	About the organization/ Area of Operation (in 100 words)	Revenue of last three years		
							2020-21	2021-22	2022-23

****The above table should be uploaded separately in excel file***

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure 11- Self-Declaration for Financial Details of PIA.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We _____ hereby declare that the information given here is true, complete and correct. And the details are given below:

Financial Data from Balance Sheet:

S. No.	Year-wise	Revenue (Annual Turnover) (Rs.)	Total Assets (TA) (Rs.)	Total Liabilities (TL) (Rs.)	Net Worth (TA – TL) (Rs.)	Grant/ Funding (Rs.)	Current Assets (CA) (Rs.)	Current Liabilities (CL) (Rs.)	Working Capital (CA – CL) (Rs.)	Remarks (in 100 words)

The Contents of this Form should be certified by a Chartered Accountant / Auditor (In case bidder is Indian, the Form should be certified by generating Unique Document Identification Number (UDIN) as per Gazette Notification No. 1 – CA(7)/192/2019 dated 02.08.2019), failing which Employer has right to reject the Bid.

In case of Financial Statements are in currency(s) other than INR, in addition to above, Bidder shall also provide above information in separate sheet duly certified by Chartered Accountant / Auditor (In case bidder is Indian, the Form should be certified by generating Unique Document Identification Number (UDIN) as per Gazette Notification No. 1 – CA(7)/192/2019 dated 02.08.2019) in INR equivalent by using methodology for adopting exchange rate as specified in Note 7 of EQC and ITB 15.4.

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Name & Sign of CA/Auditor:

Registration No.:

Seal:

UDIN No:

Phone No.:

Email ID:

Note: The details (Registration No, UDIN No, Phone no. & Email ID) should be correct & mandatory to be given.

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure 12- Self-Declaration by Community Based Organization (CBO) pertaining to placement offered to certified candidates.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Community Based Organization _____ will be offering captive placement/employment to greater than or equal to 75% certified candidates with the help of other organizations. And the details for the same are given below:

S. No.	Name of the Organization	State	District	Sector	Job Role	Job Role Type (Preferred Future/Other Future/Regular)	Number of candidates to be provided captive placement/employment	Salary to be Offered
1.								
2.								

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.

Annexure 12.1- Format for LOI to be given by the employer.

(On the letterhead of the employer)

To

Name and Address details of the CBO,

We_____ will be providing placement to the candidates trained by Training Provider _____.

S.No.	State	District	Sector	Job Role	Job Role Type (Preferred Future/Other Future/Regular)	Number of candidates to be provided captive placement/placement	Salary to be Offered
1.							
2.							

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Phone Number of the Authorized Signatory:

Email Address of the Authorized Signatory:

Date: _____

Note: The details (Phone no. & Email ID) should be correct & mandatory to be given.

Annexure 13- Self-Declaration by Community based Organization (CBO) pertaining to self-employment offered to certified candidates.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Community Based Organization_____will be offering micro entrepreneurship/self-employment to greater than or equal to 75% certified candidates with the help of other organizations. And the details for the same are given below:

S. No.	State	District	Sector	Job Role	Job Role Type (Preferred Future/Other Future/Regular)	Number of candidates to be provided micro entrepreneurship/ self-employment	Brief about self- employment nt to be provided (in 100 words)
1							
2							

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: *In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.*

Annexure 14- Self-Declaration by Educational Institutes/Center of Excellence (CoE) pertaining to number of PhD faculty in the institute.

(On the letterhead of the Applicant Entity)

To
National Skill
Development Corporation,
5th Floor, Kaushal
Bhawan,
New Moti Bagh, New Delhi-110023

In response to the Request for Proposal for providing Skill Certification under Special Project in PMKVY 4.0 (2023-24), I/ We hereby declare that our Institute_____have greater than 10 numbers of PhD faculty with us. And the details for the same are given below:

S. No.	Name of PhD faculty	Designation/ Title	Contact Number	Official Email ID
1.				
2.				

If this declaration is found to be incorrect and / or misleading then without prejudice to any other action that may be taken, the project may be terminated.

Name of the Authorized Signatory of the Applicant

Signature and Stamp of the Authorized Signatory of the Applicant

Date: _____

Note: In case of any wrong / incorrect declaration submitted by the Applicant, as requested by NSDC during evaluation of the proposal, the proposal will be rejected at any stage of evaluation or targets would be revoked (if already allocated) during implementation.