



REQUEST FOR PROPOSAL

**[End Line Assessment and Annual Data Collection as
Per Attached ToR Under GEWEP-III Project]**

RFP DOCUMENT # [000046]

RFP ISSUE DATE: [NOVEMBER 07, 2024]

PROPOSAL SUBMISSION DEADLINE: [NOVEMBER 16, 2024, 03:00 PM]

CARE AFGHANISTAN

House#242, St#1, District 10, Charahi Haji Yaqoob, Shar-e-Naw, Kabul

CONFIDENTIAL DOCUMENT

PREPARED BY
CARE®


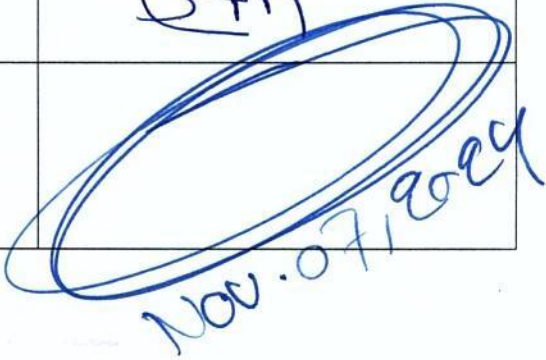
Certified by	Name	Designation	Signatures & Date
Requesting Officer	Sultan Mahmood Duranie	Senior Procurement and Logistic officer	
Certifying Officer	Abdul Azim Hakimzada	Procurement & Logistics Manager	



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1. ABOUT CARE

At CARE, we seek a world of hope, inclusion, and social justice, where poverty has been overcome and people live with dignity and security.

This has been our vision since 1945, when we were founded to send lifesaving CARE Packages® to survivors of World War II. Today, CARE is a leader in the global movement to end poverty. We put women and girls in the center because we know we cannot overcome poverty until all people have equal rights and opportunities. In 2019, CARE worked in 100 countries and reached 70 million people with an incredible range of life-saving programs.

To know more about CARE, visit: <https://www.care.org/our-work/>

2. GENERAL CONDITIONS AND CLAUSES

2.1. CARE'S GENERAL CONDITIONS

The enclosed document is not an offer to contract, but a solicitation of a vendor's proposed intent. Acceptance of a proposal in no way commits CARE to award a contract for any or all products and services to any vendor.

CARE reserves the right to make the following decisions and actions based on its business interests and for reasons known only to CARE:

- To determine whether the information provided does or does not substantially comply with the requirements of the RFP
- To contact any bidder after proposal submittal for clarification of any information provided.
- To waive any or all formalities of bidding
- To accept or reject a proposal in whole or part without justification to the bidder
- To not accept the lowest bid
- To negotiate with one or more bidders in respect to any aspect of submitted proposal
- To award another type of contract other than that described herein, or to award no contract;
- To enter into a contract or agreement for purchase with parties not responding to this RFP
- To request, at its sole discretion, selected Vendors to provide a more detailed presentation of the proposal
- To not share the results of the bids with other bidders and to award contracts based on whatever is in the best interest of CARE.



Any material statements made orally or in writing in response to this RFP or in response to requests for additional information will be considered offers to contract and should be included by vendor in any final contract.

2.2. CONFIDENTIALITY/ NON-DISCLOSURE

All information gained by any vendor concerning CARE work practices is not to be disclosed to anyone outside those responsible for the preparation of this proposal. Any discussion by the vendor of CARE's business practices could be reason for disqualification. CARE, at their discretion, reserves the right to require a non-disclosure agreement.

Reciprocally, CARE commits that information received in response to this RFP will be held in strict confidence and not disclosed to any party, other than those persons directly responsible for the evaluation of the responses, without the express consent of the responding vendor.

Finally, the information contained within this RFP is confidential and is not to be disclosed or used for any other purpose by the vendor.

2.3. PUBLICITY

Any publicity referring to this project, whether in the form of press releases, brochures, or photographic coverage will not be permitted without prior written approval from CARE.

2.4. LIABILITY

The selected vendor(s) will be required to show proof of adequate insurance at such time as CARE is prepared to procure the services. The participating vendor will also be required to indemnify and hold harmless CARE for, among other things, any third-party claims arising from the selected vendor's acts or omissions and will be liable for any damage caused by its employees, agents or subcontractors.

2.5. FORCE MAJEURE

- a. Neither Party shall be responsible for a performance that is delayed, hindered, or is rendered inadvisable, commercially impracticable, illegal, or impossible by a "Force Majeure Event." A Force Majeure event includes, without limitation, an act of nature, a pandemic, emergency, civil unrest or disorder, actual or threatened terrorism, war, fire, governmental action or interference of any kind, power or utility failures, strikes or other labor disturbances, a health warning issued by the Center for Disease Control (or similar agency), any other civil or governmental emergency and/or any other similar event beyond a Party's reasonable control.
- b. The Party that seeks to invoke this Force Majeure provision (the "Affected Party") shall provide the other Party (the "Unaffected Party") with a written notice within ten (10) days of the date the Affected Party determines a Force Majeure Event has occurred.



2.6. ERRORS AND OMISSIONS

CARE expects the vendor will provide all labor, coordination, support, and resources required based on the vendor's proposal and corresponding final SOW. No additional compensation will be available to the vendor for any error or omission from the proposal made to CARE. The only exclusions are add-ons, deletions, and/or optional services for which the vendor has received written authorization from CARE.

2.7. OWNERSHIP OF WORK

All work created during this evaluation must be original work, and no third party should hold any rights in or to the work. All rights, title and interest in the work shall be vested in CARE.

2.8. CONFLICT OF INTEREST

CARE encourages every prospective Supplier to avoid and prevent conflicts of interest, by disclosing to CARE if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, specifications, cost estimates, and other information used in this RFP.

3. COMPANY PROFILE & BIDDER'S DECLARATION

Bidders are requested to complete this form, including the Company Profile and Bidder's Declaration, sign it and return it as part of your proposal. No alterations to its format shall be permitted and no substitutions shall be accepted.

3.1. COMPANY PROFILE

Table 4.1.A Previous Work with CARE

Have you already had previous transactions with CARE?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
If marked "Yes", please provide the year of the latest transaction with CARE and the requirement that was delivered. (This is to inform everyone that this information is for system checking only. This will not be part of any evaluation process.)		
If you marked, "No" on the table above, please answer the Table 4.1.A. below:		

Table 4.1.B Other Information

Item Description	Detail(s)
Legal name of bidder	
Legal Address, City, Country	
Website	
Year of Registration	
Company Expertise	



Bank Information (Please answer below)	
Bank Name:	
Bank Address:	
IBAN:	
SWIFT/BIC:	
Account Currency:	
Bank Account Number:	

Previous relevant experience: 3 contracts				
Name of previous contracts	Client & Reference Contact Details	Contract Value	Period of activity	Types of activities undertaken

3.2. BIDDER'S DECLARATION

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Ethics: By submitting this Proposal/Quote, I/we guarantee that the bidder has not engaged in any improper, illegal, collusive, or anti-competitive arrangements with any competitors; has not directly or indirectly contacted any buyer representative (aside from the point of contact) or gather information regarding the RFP; and has not attempted to influence or offer any type of personal inducement, reward, or benefit to any buyer representative.
<input type="checkbox"/>	<input type="checkbox"/>	I/We affirm that we will not engage in prohibited behavior or any other unethical behavior with CARE or any other party. We also affirm that we have read the general clause and conditions included in this RFP and that we will conduct business in a way that avoids any financial, operational, reputational, or other undue risk to CARE.
<input type="checkbox"/>	<input type="checkbox"/>	Conflict of interest: I/We warrant that the bidder has no actual, potential or perceived Conflict of Interest in submitting this Proposal/Quote; or entering into a Contract to deliver the Requirements. CARE Procurement's Point of Contact will be notified right away by the bidder if a conflict of interest occurs during the RFP process.
<input type="checkbox"/>	<input type="checkbox"/>	Bankruptcy: I/We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgment or pending legal issues that could hinder the ability to conduct business.
<input type="checkbox"/>	<input type="checkbox"/>	Offer Validity Period: I/We confirm that this Proposal/Quote, including the price, remains open for acceptance for the Offer Validity.
<input type="checkbox"/>	<input type="checkbox"/>	I/We understand and recognize that you are not bound to accept any proposal you receive, and we certify that the goods offered in our Quotation are new and unused.



<input type="checkbox"/>	<input type="checkbox"/>	By signing this declaration, the signatory below represents, warrants and agrees that he/she has been authorized by the Organization/s to make this declaration on its/their behalf
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Supplier Name:	
Title/Designation:	
Company Name:	
Phone Number:	
Email Address:	
Date:	
Signature:	

4. CONDITIONS AND GUIDELINES FOR SUBMISSION OF PROPOSAL

4.1. PROPOSOSAL GUIDELINES

This Request for Proposal represents the requirements for an open and competitive process.

All vendors must provide written notification via email to Sultamahmood.duranie@care.org of their intent to participate, or not to participate in the bidding process by [N/A].

Proposals will be accepted until **03:00 PM [November 16, 2024], send to sultanmahmood.duranie@care.org** not later than the above specified date.

Any proposals received after this date and time will not be accepted. All proposals must be signed by an official agent or representative of the company submitting the proposal.

If the organization submitting a proposal must outsource or contract any work to meet the requirements contained herein, this must be clearly stated in the proposal. Additionally, all costs included in proposals must be all-inclusive to include any outsourced or contracted work. Any proposals which call for outsourcing or contracting work must include a name and description of the organizations being contracted.

All costs must be itemized to include an explanation of all fees and costs.

Contract terms and conditions will be negotiated upon selection of the winning bidder for this RFP. All contractual terms and conditions will be subject to review by the CARE legal



department, and will include scope, budget, schedule, and other necessary items pertaining to the project.

You must respond to every subsection including statement, question, and/or instruction without exception.

Any verbal information obtained from, or statements made by representatives of CARE shall not be construed as in any way amending this RFP. Only such corrections or addenda as are issued in writing by CARE to all RFP participants shall be official. CARE will not be responsible for verbal instructions.

4.2. PROJECT PURPOSE AND DESCRIPTION

CARE is issuing this RFP (Request for Proposal) soliciting qualified bidders to submit proposals intended for the [provide requirement description and any other requirements].

This RFP is an invitation to bid, not an offer of contract. Bidders must submit a response that complies with the minimum requirements contained herein.

4.3. PROJECT OVERVIEW

CARE is seeking a provider to submit proposals intended for the [Endline Assessment for WAQAR project]

Requirement & Specs	Qty.	Unit of Measurement	Required Delivery Lead Time	Delivery Address	Contract Period
End Line Assessment and annual Data Collection As Per Attached ToR	1	ToR	Please refer to attached ToR	Please refer to attached ToR	As per attached ToR requirement

[Provide additional requirements]

Item #	Other Requirements
1	Delivery Date & Time Bidder shall deliver the service at least one week after Contract signature.
2	Delivery Terms (incoterms) <input type="checkbox"/> EXW [Ex-works (Place)] <input type="checkbox"/> FCA [Free Carrier (Port)] <input type="checkbox"/> FAS [Free Along-Side Ship (Port)] <input type="checkbox"/> FOB [Free On-Board (Port)] <input type="checkbox"/> CFR [Cost, & Freight (Port)] <input type="checkbox"/> CIF [Cost, Insurance & Freight (Port)] <input type="checkbox"/> CPT [Carriage Paid-To (Place)] <input type="checkbox"/> CIP [Carriage & Insurance Paid-To (Place)] <input type="checkbox"/> DAP [Delivered at Place (Place)] <input type="checkbox"/> DPU [Delivered at Place Unloaded (Place)]



		<input checked="" type="checkbox"/> DDP [Delivered Duty Paid (Place)]
3	Custom Clearance (Must be linked to Incoterms at origin)	<input type="checkbox"/> Not Applicable. Shall be done by _____
		<input type="checkbox"/> Shouldered by CARE
		<input checked="" type="checkbox"/> Supplier/ Bidder
		<input type="checkbox"/> Freight Forwarder
4	Exact Address(es) of Delivery Location	
5	Warranty Period	Standard Manufacturer's Warranty (if applicable)
6	Payment Terms	30 Days upon Receipt of items
7	Quotation Validity	The quote needs to be valid for 90 days to cover all the days from bidding up to the award process. However, once the contract has been released, it shall be valid for the same coverage as reflected in the requirement above.

[Provide additional requirements]

Please submit your RFP/offer in USD Dollar currency

4.4. PROJECT TIMELINE

All bidders are advised to strictly follow the below timeline as noted.

Any technical questions arising during the preparation of your response to this RFP should be submitted in writing via email to SultanMahmood Duranie (sultanmahmood.duranie@care.org) no later than **November 13, 2024**

Schedule of Activities/ To-do	Date of the Activity/ Deadline of Submission	Responsible	Remarks
RFP Issued	November 07, 2024	CARE	
Supplier to notify CARE of intention to participate in bidding	[N/A]	Supplier	Deadlines must be strictly observed.
Deadline for submission of clarification questions to CARE	[November 13, 2024]	Supplier	Deadlines must be strictly observed.
CARE to answer all clarifications	[November 13, 2024]	CARE	
Supplier's Deadline of Submission of Proposal	[November 16, 2024] 03:00 PM]	Supplier	Deadlines must be strictly observed.
Evaluation of Proposal	N/A]	CARE	
Vendor presentation (if required)	N/A	Supplier	



Finalists selected	As soon as possible	CARE	Upon notification, the contract negotiation with the winning bidder will begin immediately.
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4.5. PROJECT REQUIREMENTS

a. Technical Requirements
a.1 Technical Proposal of the Product

REQUIREMENTS		Provide the necessary details. Attach document or provide separate sheet if needed.
A. Overall Proposal Suitability		
1	Please see the Scope of Work and any other required specifications for this project.	Please refer to attached ToR
2	Provide Delivery Lead Time	
3	Provide after-sales service (if applicable)	
4	Ability to provide sample (if applicable)	
5	Provide Warranty Period	
	(Any additional requirement that is deemed necessary for "Previous Works & Awards" Category)	

REQUIREMENTS		Provide the necessary details. Attach document or provide separate sheet if needed.
B. Previous Works and Awards		
1	Provide 3 or more client experiences or testimonials (References whose environment, size, and scope are most like CARE. Include a summary of the work completed for each account. Include reference contact names, with telephone numbers and email addresses.)	
2	Provide previous records of performance and service.	
3	Provide citations and awards. This encompasses reviewing the citations and awards a vendor has received from other customers and award-giving bodies.	
4	Provide any testimonials, survey response/s from previous buyers and/or partners.	



5	(Any additional requirement that is deemed necessary for "Previous Works & Awards" Category.	
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REQUIREMENTS	Provide the necessary details. Attach document or provide separate sheet if needed.
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C. Technical Expertise and Organizational Experience		
1	Provide 5 Availability of vendor's representatives to call upon and consult with.	
2	Any proof that the vendor has the Ability to render satisfactory service in this instance.	
3	Provide Years of experience in providing the same requirement to other companies.	
4	Provide the latest audited Financial Statement	
5	(Any additional requirement that is deemed necessary for "Technical Expertise and Organizational Experience.	

REQUIREMENTS	Provide the necessary details. Attach document or provide separate sheet if needed.
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D. Others		
1	Provide any relative requirements which were not mentioned above. (delete if not applicable)	

b. VALUE & COST (Financial Requirements)

(Provide below requirements, payment terms, etc., if there's any)

See attached template (in Excel File) to be used for your financial bid.

Compliance with Requirements

	Yes, we will comply	No, we cannot comply	If marked as "No", please provide counter proposal
Minimum Technical Specifications	<input type="checkbox"/>	<input type="checkbox"/>	
Delivery Lead Time	<input type="checkbox"/>	<input type="checkbox"/>	
Delivery Term (INCOTERMS)	<input type="checkbox"/>	<input type="checkbox"/>	
Warranty Period (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Validity of Quotation	<input type="checkbox"/>	<input type="checkbox"/>	
Payment Terms (30 Days)	<input type="checkbox"/>	<input type="checkbox"/>	
Other Requirements (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>	



4.6. EVALUATION CRITERIA

CARE will evaluate all proposals based on the following criteria. To ensure consideration for this Request for Proposal, your proposal should be complete and include all of the following criteria:

- **Overall Proposal Suitability:** proposed solution(s) must meet the scope and needs included herein and be presented in a clear and organized manner.
- **Previous Work and Awards:** Bidders will be evaluated on examples of their work pertaining to the requirement as well as client testimonials and references.
- **Technical Expertise and Organizational Experience:** Bidders must provide descriptions and documentation of staff technical expertise and experience. Bidders also need to provide their experiences as an organization which include but not limited to years of experiences, financial stability, expertise, and edge to other competitors.
- **Value and Cost:** Bidders will be evaluated on the cost of their solution(s) based on the work to be performed in accordance with the scope of this project.

Note for Country Offices (CO): The specific criteria must closely represent the objective and scope given the nature of the procurement required. Evaluation criteria reflected above can be added and or adjusted depending on the requirement and the type of purchase. The final evaluation criteria must be reflected above prior to releasing of this RFP

CARE will review proposed budgets and pricing after the initial review of the criteria above.*

TERMS OF REFERENCE

Endline Assessments:



Project Title	Gender Equality and Women's Empowerment Program (GEWEP III)
Project code (FC/AID)	NO185
Budget manager	Milan Sherzad Acting Project Manager
Project start and end data	Mar 2020- Feb 2024
Date of the survey	Nov/Dec 2024
Type of survey	Endline assessment
Location of the survey	Municipality-districts of Kabul (1, 5, 6, 7, 8, 13, 16, 17 & 18 and three provincial-districts Mirbachakot, Farza and Bagرامي of Kabul province and Kandahar city.
Attached documents	Result framework, project proposal, ToC of project.

1. Introduction

CARE is a humanitarian non-governmental organization committed to working with poor women, men, boys, girls, communities, and institutions to have a significant impact on the underlying causes of poverty. CARE seeks to contribute to economic and social transformation, unleashing the power of the most vulnerable women and girls.

CARE Afghanistan is part of the global CARE International organization, which helps poor people in more than 100 countries in the world. CARE has worked in Afghanistan since 1961. CARE is an independent, non-political and impartial aid organization, which provides help to those who most need it. CARE works to bring positive change in the lives of poor people in Afghanistan. Currently, CARE Afghanistan is operating four programs: Resilience Program (RP), Education/ women social economic empowerment Program, humanitarian and Health, Equity & Right (HER) Program. The focus of CARE Afghanistan's programming is on education, health, women's empowerment, resilience, livelihoods food security, emergency response and rehabilitation, and rural development.

The Gender Equality and Women's Empowerment Program (GEWEP III) is a five-year program implemented by CARE Norway in collaboration with 9 CARE Country Offices (Afghanistan, Burundi, DRC, Mali, Myanmar, Niger, Rwanda, Jordan, and Palestine) and their local partner organizations. The program is funded by Norad and runs from Mar 2020 through Feb, 2025. In Afghanistan, the project has the following three main objectives and three relevant outcomes which are outlined in the project result frame :

1. Objective one: Women's agency is strengthened, including a stronger voice and meaningful participation, and greater economic independence.

- Global Outcome one under the first objective: Women and girls are economically empowered

This outcome is consisted of two global outputs that project contributes to and they are as of output 1.1 Women and girls have access to informal financial services through Village Saving and Loan Associations (VSLAs) and output 1.3 GEWEP trains and supports women and girls to increase their income opportunities

This outcome includes establishment of and support to village saving and loan associations (VSLAs) and women access to financial resources, financial opportunities and job placements through to providing support to women entrepreneurs, facilitating vocational training to a number of VSLAs members, provision of support to income generation activities (IGAs) of women who have membership of VSLAs and conducting business development training to women who have membership of VSLAs.

2. Objective two: Women are supported by the men in their communities, including male leaders

- Global Outcome two under the second objective of the project: Transformed gender norms in the households

This outcome is consisted of three global indicators that project contributes to, and they are as of output 2.1.1 Men engaged to reflect on gender norm and equality, output 2.1.2 Men supported to become advocates for gender equality, and output 2.2 Influential leaders engaged to promote gender equality.

Through outcome 2, the project ensures targeted men are aware of the benefits of gender equality, rights of women and girls and balanced power relations at the household level as well as of non-violent relationships. The program increases the engagement of men in promoting women's and girls' rights and in so doing contribute to balanced power relations and non-violent relationships at the household level.

3. Objective three: Women-led CSOs have increased ability to influence public decision-making processes, through enhanced credibility and technical capacity, and stronger collective action.

- Global Outcome three under the third objective: Civil society and grassroots movements legitimately advocate for women's rights, participation, governance and social accountability

There are two global outputs under outcome two that project contributes to and they are as of output 3.1 Women received leadership skills and output 3.2 Civil Society that works to promote gender equality receive support to increase their capacity.

Through this outcome, CARE and partner WCLRF will support KWA to build decisions with other CSOs and actors by maintaining networking, coordinating and jointly advocating for women rights at local level where possible given the current context. Through the five years of the project, WCLRF built Capacity of 12 local women-led CSOs including, in resource mobilization and fundraising.

- Global Outcome 4: Increase household resilience

GEWEP III Theory of Change: Based on CARE's Gender Equality Framework, the project has three domains of change:

Domain of change 1: Build Agency: The agency of women and girls as individuals and as collectives to claim and realize their full human rights. This includes building confidence, self-esteem and aspirations (non-formal sphere), and knowledge, skills and capacities (formal sphere).

Domain of change 2: Change Relations: The power relations through which people live their lives. This includes intimate relations and social networks (non-formal sphere) and group membership, and citizen and market negotiations (formal sphere).

Domain of change 3: Transform Structures: The transformation of social, cultural, religious and political institutions towards gender equality. This includes discriminatory social norms, customs, values and exclusionary practices (non-formal sphere), and laws, policies, procedures and services (formal sphere).

The GEWEP III project also aims to address challenges faced by Kabul Women Association (KWA) members by building its local-level evidence based advocacy on women's rights and the challenges faced by CSO during the current situation.

a. Besides, project attempts to gain community's acceptance through engagement of men in program activities and targeted more than 13000 women of households in Kabul and Kandahar Provinces with the aim to strengthen the capacity of Afghan women's groups to promote women's human rights in Afghanistan. The GEWEP III is implemented directly by CARE and its local implementing partner (WCRLF); CARE plays an overall leadership role and implements field activities.

Afghanistan Result Framework GEWEP III

Overall program goal: Improved gender equality in program countries

Afghanistan	Results	Indicator Code	Indicators
Reach	Direct reached women and girls	RW1	# of women and girls reached #de femmes et de filles atteintes
	Direct reached men and boys	RM1	# of men and boys reached # d'hommes et de garçons atteints
	Indirect reached	IR2	# of people indirectly reached (families of women and girls directly reached) # de personnes touchées indirectement (familles de femmes et de filles touchées directement)
Thematic area 1 Women Economic Empowerment	Global Outcome 1 Women and girls are economically empowered	GOC 1.1	% of women who report they are able to equally participate in household financial decision-making % de femmes qui déclarent être en mesure de participer de manière égale à la prise de décision financière du ménage.
		GOC 1.2b	# of women in the impact groups who are users of informal financial services # de femmes dans les groupes d'Impact qui sont des utilisatrices de services financiers informels
		GOC 1.4	% of women trained on IGA/business/vocational who successfully earn extra income % de femmes formées sur les AGR/entreprises qui réussissent à obtenir un revenu supplémentaire.
Intervention area 1.1 Access to capital through VSLA	Global Output 1.1 Women and girls have access to informal financial services through VSLAs	GOP 1.1.1	# of new VSLA groups established # de nouveaux groupes VSLA établis
		GOP 1.1.2	# of VSLA women in newly established VSLA groups in GEWEP III # de femmes dans les groupes VSLA nouvellement créés dans le GEWEP III
		GOP 1.1.3	% average drop-out rate Taux d'abandon moyen en %.
International area 1.3 Income generation	Global Output 1.3 GEWEP trains and supports women and girls to increase their income opportunities	GOP 1.3.1	# of women trained on IGA/business skills/vocational # de femmes formées aux AGR/compétences commerciales
Thematic area 2 Norm Change	Global Outcome 2 Transformed gender norms in the households	GOC 2.1	% of men who agree that a woman has a place in household financial decision making % d'hommes qui sont d'accord pour dire qu'une femme a sa place dans la prise de décision financière du ménage
		GOC 2.2	% of men who do not think it is justifiable to hit their wives % d'hommes qui ne pensent pas qu'il soit justifié de frapper leurs femmes.
Intervention area 2.1 Men and boys engaged	Global Output 2.1.1 Men engaged to reflect on gender norm and equality	GOP 2.1.1	# of men that participated in reflection on norms on gender roles and gender equality. # d'hommes ayant participé à une réflexion sur les normes relatives aux rôles des hommes et des femmes et à l'égalité des sexes.
	Global Output 2.1.2 Men supported to become advocates for gender equality	GOP 2.1.2	% of men who had taken concrete action to increase gender equality in their households, their workplace or in their communities. % d'hommes ayant pris des mesures concrètes pour accroître l'égalité des sexes dans leur foyer, sur leur lieu de travail ou dans leur communauté.
Intervention area 2.2 Tradition leaders' roles	Global Output 2.2 Influential leaders engaged to promote gender equality	GOP 2.2.1	# of religious and traditional leaders engaged # de chefs religieux et traditionnels engagés
Thematic area 3 CSO strengthening	Global Outcome 3 Civil society and grassroots movements legitimately advocate for women's rights, participation, governance and social accountability	GOC 3.1	% of women in VSLA who takes decision-making positions in formal (government) and informal (civil society, private) sectors % de femmes dans les VSLA qui occupent des postes de décision dans les secteurs formel (gouvernement) et informel (société civile, privé).
		GOC 3.2	Partner capacity score (on leadership, strategic management, financial management, gender, governance, service delivery, advocacy, sustainability) Score de capacité des partenaires (sur le leadership, la gestion stratégique, la gestion financière, le genre, la gouvernance, la prestation de services, le plaidoyer, la durabilité).
Intervention area 3.1 Women leadership	Global Output 3.1 Women received leadership skills	GOP 3.1.1	# of women trained on leadership skills # de femmes formées aux compétences de leadership
Intervention area 3.2	Global Output 3.2 Civil Society that works to	GOP 3.2.1	% of funds transferred to partners who work for gender equality % de fonds transférés aux partenaires qui travaillent pour l'égalité des sexes

CSO capacity	promote gender equality receive support to increase their capacity	GOP 3.2.2	# of CSOs that implement capacity building during the reporting year # d'OSC qui ont mis en œuvre le renforcement des capacités au cours de l'année considérée.	
Thematic area 5 Resilience	Global Outcome 5 Increase household resilience	GOC 5.1	% of households that have experienced shocks and did not have long term negative impact % de ménages ayant subi des chocs et n'ayant pas eu d'impact négatif à long terme	

Indicators unique to country program				
Thematic areas	Results	Indicator Code	Indicators	
Women Economic Justice	Global Outcome 1 Women and girls are economically empowered			
Intervention area 1.1 Access to capital through VSLA	Global Output 1.1 GEWEP delivers informal financial services to women and girls through VSLAs	COP 1.1.1	# of existing VSLA women members supported	
		COP 1.1.2	# of accumulated annual savings in USD	
		COP 1.1.3	# of accumulated annual loans in USD	
		COP 1.1.4	# of loans offered annually by VSLA groups	
Intervention area 1.3 Income generation	Global Output 1.3 GEWEP trains and supports women and girls to increase their income opportunities	COP 1.3.1	# of VSLA and non-VSLA women trained on entrepreneurship with business support	
		COP 1.3.2	# of women coached on their IGA/business ideas	
		COP 1.3.3	# of women supported financially to start their own IGA	
		COP 1.3.4	# of women received vocational training	
		COP 1.3.5	# of VSLA women received marketing and business skill training	
		COP 1.3.6	# of women linked with market and private sector	
Norm change	Outcome 2 Transformed gender norms in the households and reduced gender based violence	COC 2.1	# of cases of women's rights violations reported through the case management system	
		COC 2.2	% of ever-partnered women aged 15-49 years experiencing intimate partner physical and/or sexual violence (indicator to be updated following baseline)	
Intervention area 2.1 Men and boys engaged	Global Output 2.1 Men engaged to reflect on gender norms and equality	COP 2.1.1	# of role model men identified	
Intervention area 2.3 GBV survivors	Country Output 2.3: GEWEP facilitates access to services addressing women's rights issues	COP 2.3.1	# GBV survivors supported	
CSO Strengthening	Global Outcome 3 Civil society and grassroots movements legitimately advocate for women's rights, participation, governance and social accountability			
Intervention area 3.1 Women leadership	Global Output 3.1 GEWEP trains women in VSLA networks, partner organizations and movements on leadership	COP 3.1.1	# of KWA members trained on resource mobilization	

Intervention area 3.2 CSO capacity"	Country Output 3.2 GEWEP works with CSOs to coordinate and advocate for women's rights, including participating and monitoring the NAP 1325	COP 3.2.1	# of regular coordination sessions conducted with KWA members and like-minded organizations to promote organizational structure and women participation in public process	
		COP 3.2.2	# of Advocacy Groups formed	

2. Purpose of the assessment

The overall purpose of the survey is to: generate knowledge from the GEWEP III project experience and to assess the processes and achievements made towards the final targets and to draw lessons for future programming. This evaluation is to be conducted as an end of the project and will focus on the entire implementation. The assessment is intended to be forward looking which will capture effectively lessons learnt and provide information on the nature, extent and where possible, the effect of the GEWEP project specifically on the KWA, VSLA groups and men and boys engagement that will also emphasis on learning lessons in terms of understanding what has and what has not worked as a guide for future planning.

The assessment will have two separate component/outcome including) 1) a survey among target and impact group members to collect data on outcome and some output level indicators in the Result Framework using the already established tools. For this data collection, the program has an excel-based Data Registration Tool – DRT (functioning as a temporary database where raw data can be recorded, cleaned and analysed) and an indicator guide (defining which questions need to be covered in the data collection and providing guidance on how to record the data in the DRT) It is expected that these tools will be used for the data collection, and 2) endline assessment for assessing/evaluating the entire project progress and achievements considering aspects beyond the indicators in the Results Framework.

Specific Objectives of the assessment

1. To evaluate the relevance and consistency of the activities and outputs of the project with the overall goal, impact and the attainment of the objectives
2. To evaluate the extent to which vulnerable women have achieved economic empowerment through improved access to economic resources and opportunities, measured by their participation in Village Saving and Loan Associations (VSLAs), access to financing, entrepreneurship, and employment opportunities
3. To assess the effectiveness of interventions in transforming gender norms at individual, household, and community levels, and to measure the impact on gender equality and the prevalence of gender-based violence (GBV)
4. To measure the inclusivity and responsiveness of relevant stakeholders towards women and marginalized groups, focusing on the effectiveness of advocacy for women's rights and participation in local governance.
5. To measure the factors influencing the achievement or non-achievement of the objectives
6. *To assess the effectiveness of VSLAs savings and loans on women financial contribution at the household level through being involved in VSLAs and/or income generation activities.*
7. To assess the effect of capacity strengthening and support KWA received and assess KWA's development as a civil society actor in Afghanistan).
8. To Gauge progress against objectives and expected results (outcome and output indicators) that are outlined in percentage in the project result framework with a focus on the change and impact experienced by the target population as well as any unintended consequences. This is one of the key components of the assessment which should be focused on for both endline and annual survey among target and impact group members through the DRT.
9. Assess the implementation and process of the project to understand potential for learning, and outlining the project sustainability, effectiveness, efficiency, coherence, impact and relevance (DAC criteria).

The results of the endline assessment will inform the implementers, the donor and the involved stakeholders about progress and achievements made, as well as capture lesson learned for the future programming.

3. Key assessment questions:

1. How relevant and consistent are the project activities and outputs with the overall goal and objectives, and what recommendations can be drawn for future programming?
 - What is the alignment between project activities and intended goals?
 - To what extent do the outputs reflect the project's objectives?
 - What lessons learned can contribute to future programming?
2. To what extent have vulnerable women achieved economic empowerment through program interventions?
 - How has participation in Village Savings and Loan Associations (VSLAs) contributed to economic empowerment?
 - What improvements in access to financing, entrepreneurship, and employment opportunities can be observed?
3. What has been the effectiveness of the interventions in transforming gender norms and addressing gender-based violence (GBV)?
 - How have the interventions influenced gender equality at individual, household, and community levels?
 - What measurable reductions in GBV can be attributed to these interventions?
4. How inclusive and responsive are relevant stakeholders towards women and marginalized groups, and what advocacy successes can be identified?
 - What actions have stakeholders taken to advocate for women's rights?
 - How effective has women's participation in local governance been facilitated by these stakeholders?
5. What factors have influenced the achievement or non-achievement of the project's objectives, and what is the sustainability and effectiveness of project implementation?
 - What challenges and enablers have affected the project's outcomes?
 - How can the operational processes be understood to enhance future project sustainability?

6. CARE's MEL principles and standards

CARE International has developed 7 MEL Principles and standards which we use to inform our approaches to monitoring, evaluation, accountability and learning. Our evaluation standards state that:

- a. Evaluations should provide CARE with a complete and comparable assessment of the before-after or with-without situation;
- b. Evaluations should assess desired as well as unexpected outcomes;
- c. Evaluations should be conducted in line with ethical principles by professionals who establish and maintain credibility in the evaluation context;
- d. Evaluations engage all key stakeholders, including CARE staff members to ensure ownership, buy-in and credibility of findings;
- e. Evaluations need to meet high standards of methodological quality and produce findings which are appropriate to the purpose of the evaluation;
- f. Progress against CARE's global impact indicators should be measured where it is possible to do so.

The assessment must always respect the security and dignity of the stakeholders with whom CARE works, incorporating gender and power elements (see CARE's gender analysis framework) during the evaluation. To gain a better understanding of potential differences in gender and power elements, evidence should be able to be disaggregated by sex, age, and any other relevant criteria defined in collaboration with CARE.

4. Survey methodology

- **Design tools, training enumerators:** This will be done by consultancy firm; where the consultant will develop initial draft of the tools and CARE will support in review. However, CARE already developed data collection tools for some of the thematic areas but it requires to add addition questions to fully align with the objective. The consultant/consultancy firm will be responsible for defining and carrying out the overall assessment approach. This will include development of the questioners and data collection tools ,specification of the

techniques for data collection and analysis, structured field visits and interactions with beneficiaries and the assessment team. CARE will provide a comprehensive orientation for the consultancy team who are engaged in the DRT data collection tools and reporting, however, on the endline assessment tools, the consultancy will manage the training to their enumerators.

- **Field data collection, data cleaning and verification:** Data collection & the interview tools to be developed by the consultant firm as well as a thorough study of project documents, including agreement, proposal, LFA, implementation plan, analysis of the collected data and writing of the report. The data collection will be done using mixed approaches in person and remotely through phone, this will be further discussed during the kick-off meeting.
- **Literature review, cross-sectional analysis and report write-up:** this is expected from the consultancy to manage and provide contextualized, evidenced-based, and technically appropriate report and findings meeting donors' requirements. The process, retrieving existing documents and data, will include: a desk review of existing literature including the project proposal, result framework, formative research, relevant national health surveys and studies for Afghanistan, implementation plans, M&E data, formal policy documents, official statistics, and other relevant quantitative and qualitative secondary data that will support the assessment implementation strategies. Information will be provided to the external assessment team as per the proposed assessment schedule.
- **Presentation, CARE Norway discussion and dissemination:** CARE Afghanistan will present findings and discussion with the stakeholders, CARE will also engage the consultant support in the presentation of the technical findings where required.

4.1. Primary Data

To answer the Key assessment questions, data will be collected based on the proposed methodology and tools by the assessment team using the approved sample size which will be population or beneficiary based. The sample size will be shared with consultancy once onboard. Some of the key stakeholders that must be targeted through the primary data collection include:

- KWA members,
- KWA executive members,
- VSLA members,
- CSOs with focus on women's rights,
- Women's lead organizations,
- Community male members and community/religious leaders,
- women trained on Income generation activities (IGA)
- Project staff and WCLRF staff

4.2. Secondary Data

The process, retrieving existing documents and data, will include: a desk review of existing literature including the project proposal, Theory of Change, formative research, implementation plans, M&E data, MIS system data, formal policy documents, official statistics, and other relevant quantitative and qualitative secondary data that will support the evaluation implementation strategies. Information will be provided to the external evaluation team as per the proposed evaluation schedule.

4.3. Assessment tools

Assessment tools will be developed by consultancy; and CARE Afghanistan through its MEAL department will monitor field data collection, while the data collection and implementation of the entire assessment process including data collection is the consultancy responsibility. The consultancy firm/consultant will develop the data collection tools, present them to CARE Afghanistan's program and MEAL technical teams for validation, and then build them into Kobo. As mentioned above, for some of the outcome level indicators specific data collection tools already developed and are expected to be used by the consultancy, and an in-depth orientation will be provided to the consultancy on the tools and methodology. We have a specific guide and tools for the indicators included in the RFW and DRTs and the guideline will be shared with the consultancy once onboard.

SAMPLING GUIDANCE for Annual survey among target and impact group members through the DRT:

The below table reflects the recommended sample size for the annual data collection 2024 through the Data Reporting Tool (DRT) for the final program reporting, however, for the endline assessment the consultancy will provide a separate sample size to be more representative and capture all the project interventions.

Province	District	Sampled Villages	# of VSLAs sampled	# of EMBs sampled	# of sampled women trained in IGA
Kandahar	Kandahar city	Erazai	1	0	0
Kabul	Mirbachakot	Sarye Khoja	0	3	1
Kabul	Mirbachakot	Mirbacha kot	5	0	0
Kandahar	Kandahar city	Haji Arab	1	0	0
Kabul	Farza	Farza	4	0	0
Kabul	Mirbachakot	Maraki	1	3	3
Kabul	Mirbachakot	Salighan	0	3	1
Kabul	Mirbachakot	Sikhan Baqali	0	2	1
Kabul	Kabul city	District 13	9	21	17
Kabul	Bagrami	Qala-e- Ahamad Khan	1	2	7
Kabul	Farza	Zargaran	1	0	1
Kabul	Bagrami	Qala-e-Noman	0	3	4
Kabul	Kabul city	District 16	15	12	15
Kabul	Mirbachakot	Khwajagian	1	0	1
Kabul	Kabul city	District 5	8	18	9
Kabul	Kabul city	District 8	5	17	8
Kandahar	Kandahar city	Gachkhana	2	0	0
Kabul	Farza	Payan De	1	3	4
Kabul	Kabul city	District 6	10	14	19
Kabul	Kabul city	District 7	9	17	11
Kabul	Bagrami	Bagrami	9	2	0
Total			83	120	102

Sample guidance for DRT only:

- Of 5 Districts, all 5 Districts will be included in the survey.
- For each of the Districts, the Villages have been randomized for the data collection. These Villages are shown in the third column in the above table.
- **Women**
 - For each randomly selected Village, **randomly pick the number of VSLA groups** as shown in the fourth column in the above table.
 - For each randomly selected VSLA, **randomly select 4 women members** and interview them using the women set of questions in the DRT.
 - In addition, for each randomly selected Village, **randomly pick the number of women trained in IGA** as shown in the sixth column in the above table . Some of them might overlap with women in VSLA.
- **Engaged men and boys- EMB**
 - For each randomly selected Village, **randomly pick the number of engaged men and boys** as shown in the fifth column in the above table, and interview them using the men set of questions in the DRT.
- **Note for EMB**
 - For **each EMB you interview, you should interview one neighbor who is not EMB**, using the men set of questions in the DRT.

Responsibilities and tasks

1. Preparation phase	Who implement	Who ensure quality control and verification	Who validate the final version	What deliverables and what is the audience
Inception report	Consultancy	CARE Afghanistan and CARE Norway	MEAL unit	Inception report should detail out understanding about the ToR/ assignment, implementation work plan, data collection methodology, sampling strategy, data collection questionnaire/ tools, output table (which related with the questionnaire) to MEAL unit and program team
Questionnaire Design	Consultancy	CARE Afghanistan and CARE Norway	MEAL and Resilience Program-RP	Tools to be developed by consultancy and approved by CARE
Questionnaire translation	Consultancy	MEAL unit and program team	MEAL unit	Tools to be translated in local language (Dari/ Pashto) by consultancy and approved by CARE AFG.
2. Field work				
Trainings to surveyors	Consultancy	MEAL unit	MEAL	Orientation session on tools to be delivered to the surveyors
Field test	Consultancy	MEAL unit	MEAL	Tools will be tested in field for one day by consultancy and after provision of possible required amendment to be finalized for final implementation
Implementation of the survey	Consultancy	MEAL	RP	The consultancy is responsible for the implementation of the survey including data collection, coordination and other field level activities. CARE only provide coordination support at the field level with BNFs through female community volunteers (FCV)
3. Data entry				
Database creation Data entry Data cleaning	Consultancy and MEAL	Consultancy	MEAL unit	Database for FGD and survey (creation of kobo) to be developed by consultancy. Quality of data collection and data entry, provide drafting and finalization of database is responsibility of consultancy. Raw, compiled & cleaned database including quantitative output and syntax files, qualitative transcripts, field notes and Questionnaires to be delivered by Consultancy to CARE which will be used as annex of report
4. Data analysis				

Data analysis	Consultancy	Consultancy	MEAL and RP/Program	Consultancy is responsible to compile, quality assure and analyze data and produce a consolidated endline and DRT reports
5. Reporting	Consultancy	CARE Afghanistan and CARE Norway	SPCs and DRT format	Consultancy is responsible to submit final endline assessment and DRT assessment reports incorporating 2-3 rounds of feedback depending upon quality of report. Final products should gain approval of CARE Afghanistan and CARE Norway as final version. For the DRT specific reporting template will be use and will share by CARE. For the endline assessment the template, please refer to the section # 8 below.
6. Dissemination and follow-up	PM	SPC	DCD	CARE Afghanistan has authority to disseminate final product as required.

5. Coordination

PQ unit and program team will provide the consultant with necessary support to undertake and implement the assignment and execute the objective of this ToR. This will have included:

- Provide initial briefing and existing work overview,
- Provide relevant documents and technical support,
- Monitor regularly, and provide feedback and ensure effectiveness of the contract,
- Support the consultant in accessing relevant stakeholders

6. Chronogram of the survey

The following tables delineates the evaluation timelines and milestones during the evaluation process:

1. Preparation phase	Week 2	Week 3	Week 4-5	Week 1-2	Week 3 -4	
	Nov 2024			Dec 2024		Jan 2025
Terms of References						
Procurement Announcement						
Contract/POs						
Consultant's Kick-off meeting with CARE						
Review of project documents and other publicly available material from other agencies etc.						
Development of methodology/sample size						
Questionnaire Design, finalization and translation of tools						

Field team recruitment (external to the project team)						
2. Field work						
Trainings to surveyors						
Field test						
Implementation of the survey						
3. Data entry						
Database creation						
Data entry						
Data cleaning and processing						
4. Data analysis						
Data analysis and cross sectorial analysis						
5. Reporting						
Submission of draft report to Afghanistan and CARE Norway						
Feedback of CARE on the draft report						
Final submission of the report						
Submission of final datasets with CARE						
6. Dissemination and follow-up						

7. Results and findings utilization

The assessment findings and processes will be used and shared by relevant stakeholders, including CARE Afghanistan, CARE Norway, KWA and concerned local stakeholders.

8. Final endline report template and Annual Data Reporting Tool (DRT)

It is recommended to use the CARE template for the report and, where required, incorporate any additional donor-required components. That will help standardize reporting across evaluations and to ensure key information is not missing from reports. Below key recommended key components that provides section headings and descriptions as guidance for the organization of an evaluation report. However, for the DRT a separate reporting template will be shared once the data collection is done.

Rule of thumb: The report should not exceed 50 pages (excluding all annexes) in MS Word and use consistent page formatting, margin, fonts, and line spacing.

Suggested component includes but not limited to:

- Cover Page (1 page)
- Table of Contents (1 page)
- List of Acronyms (1 page)
- Acknowledgements
- Executive Summary (1-2 pages)
- Introduction (up to 5 pages)
- It should include the follow subsections:
- Purpose and Evaluation objectives (1 page)
- Evaluation Questions (1 page)
- Methodology and Study Design (up to 5 pages)
- Results (by Evaluation Question) (up to 10 pages)
- Analysis (up to 8 pages)
- Limitations and Challenges (up to 3 pages)
- Conclusions and Lessons Learned (up to 7 pages)
- Recommendations (up to 8 pages)
- Annexes (no page limit)

- Annex reporting on the CI indicators

IMPORTANT NOTES:

- The external evaluator **must submit a FINAL version of the report** within the timeline and comply with data protection, ethical concerns, and others as relevant. A final report needs to be received prior to allocation of final payment. assessment report titled draft will not be accepted as final.

9. Data protection and management

Data Disclosure

The external evaluator should deliver, at minimum, all files including: quantitative data sets (raw and refined products), transcripts of qualitative data and others in an easy to read format, and maintain naming conventions and labelling for the use of the project/program/initiative and key stakeholders.

All documents should be compliant with the following conditions (see [data format requirements](#)):

- Program Quality Department will have ownership of all evaluation-related data and documentation. Communicating the findings from this evaluation and all communications will be dealt as per CARE's communication policy.
- CARE requires that the datasets that are compiled or used in the process of external evaluation are submitted to CARE when the evaluation is completed.
- **Data must be disaggregated by gender**, age and other relevant diversity, etc.
- Datasets must be anonymized with all identifying information removed. Each individual or household should be assigned a unique identifier. Datasets which have been anonymized will be accompanied by a password protected identifier key document to ensure that we are able to return to households or individuals for follow up. Stakeholders with access to this document will be limited and defined in collaboration with CARE during evaluation inception.
- In the case of textual variables, textual datasets or transcripts please ensure that the data is suitable for dissemination with no de-anonymizing information **unless** these are case studies designed for external communication and suitable permission has been granted from the person who provided the data. In these circumstances, please submit, with the case study, a record of the permission granted, for example a release form¹.
- Where there are multiple datasets (for example both tabular and textual datasets) identifiers must be consistent to ensure that cases can be traced across data lines and forms.
- CARE must be provided with a final template of any surveys, interview guides, or other materials used during data collection. Questions within surveys should be assigned numbers and these should be consistent with variable labelling within final datasets.
- Formats for transcripts (for example: summary; notes and quotes; or full transcript) should be defined in collaboration between CARE and the external evaluator at the evaluation inception
- In the case of tabular datasets variable names and variable labels should be clear and indicative of the data that sits under them. Additionally, the labelling convention must be internally consistent and a full codebook/data dictionary must be provided.
- All temporary or dummy variables created for the purposes of analysis must be removed from the dataset before submission. All output files including calculations, and formulae used in analysis will be provided along with any Syntax developed for the purposes of cleaning.
- We require that datasets are submitted in one of our acceptable format types.
- CARE must be informed of and approve the intended format to be delivered at evaluation inception phase. Should this need to be altered during the project CARE will be notified and approval will be needed for the new format.
- The external evaluator will be responsible for obtaining all necessary permissions, approvals, insurance, and other required permits needed for data collection. These include required permits related to data collection

¹ All release forms should be agreed in advance with CARE.

from human subjects, including necessary ethical review board approvals (ERB) and health and accident insurance for evaluation team members.

10. Eligibility Criteria

The successful consulting firm will have a solid track record on the criteria below, with examples of evidence for each:

General criteria

- Demonstrable expertise and conducting assessment, studies and research on Women's Empowerment and development programs,

Technical criteria

- Minimum 3 years of experience with, and knowledge on designing and conducting quantitative and qualitative survey/research with special focus on the women's economic empowerment, or developmental studies, contract/ completion certificates to be attached as proof– **45 marks**
- List of successfully designed and managed large-scale robust research assessments and in similar nature and field (women economic and livelihood)– **30 marks**
- Study team leader and key teams need to have relevant degree/experience in livelihood and WEE, social sciences, or developmental studies or equivalent education and experience - **15 marks**
- Team composition with M&E and research experts (preferably international staff for writing the narrative) – **10 marks**

11. Required External Response to Terms of Reference

A technical and cost proposal based on this Terms of Reference (ToR) is requested from the consultant or consulting firm. The proposal should contain:

1. Detailed plan of action for field work indicating staff-days required
2. Specific roles and responsibilities of the team leader, supervisory chain and other core members of the evaluation team.
3. Schedule of key activities preferably in a format such as a Gantt chart.
4. Detailed budget with justification. The external evaluation proposal should include a reasonable detailed budget to cover all costs associated with the evaluation. This should be submitted by major activities and line items for CARE's review and decision. This includes a break-down of the cost to contract external evaluation team members, international and local travel, and in-country lodging and per diem. Other related costs that might be in the budget include expenditures for hiring local personnel (drivers, translators, enumerators and other local technical experts), translating reports, and renting meeting rooms for presentations/workshops.
5. Updated CV of Team Leader and other core members of the Evaluation Team
6. A profile of the consulting firm (including a sample report if possible)

12. Payment mechanism

The payment will be done in two instalments as follows:

First instalment (30%): upon the completion of kick-off meeting, approval of inception report and tool development.

2nd instalment (70%) will be paid upon the completion and finalization of the assessment report.

13. Submission Guideline

Interested candidates are requested to submit their proposals clearly defining their work approach and a proposed costing for the work to CARE Afghanistan Procurement Department Head - email address