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.pmkvyofficial.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.pmkvyofficial.org/photos/shares/products/Vg02jFKdaapOWm3xfjSOtmQ4Dlk97xkmtPGx5AP2.pdf, dated 14th November 2023
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.

<table>
<thead>
<tr>
<th>S. No</th>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

THAT copies of the aforesaid resolutions certified to be true be furnished to NSDC”
CERTIFIED TO BE TRUE
For,

(Signature) (Signature)
Name: Name:
Designation: Designation:
Date: Date:
Place: Place:
DIN/PAN: DIN/PAN:
Annexure 2- Waiver/Flexibility Required for Project Execution

Details of Waiver/ Flexibility:

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:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>State</th>
<th>Distric t</th>
<th>Sector</th>
<th>Job Role</th>
<th>Job Role Type (Preferred Future/Other Future/Regular)</th>
<th>Number of candidates to be provided captive placement/placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>S. No</th>
<th>Name of Organization</th>
<th>Website Link of the organization</th>
<th>Name of the Head of organization</th>
<th>Contact Number of the Head of Organization</th>
<th>Email Address of the Head of Organization</th>
<th>About the organization/Area of Operation (in 100 words)</th>
<th>Revenue of last three years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2020-21</td>
</tr>
</tbody>
</table>

*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:

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

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/placement to greater than or equal to 75% certified candidates with the help of other organizations. And the details for the same are given below:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of the Organization</th>
<th>State</th>
<th>District</th>
<th>Sector</th>
<th>Job Role Type (Preferred Future/Other Future/Regular)</th>
<th>Number of candidates to be provided captive placement/placement</th>
<th>Salary to be Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 __________.

<table>
<thead>
<tr>
<th>S.No.</th>
<th>State</th>
<th>District</th>
<th>Sector</th>
<th>Job Role</th>
<th>Job Role Type (Preferred Future/Other Future/Regular)</th>
<th>Number of candidates to be provided captive placement/placement</th>
<th>Salary to be Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>State</th>
<th>District</th>
<th>Sector</th>
<th>Job Role</th>
<th>Job Role Type (Preferred Future/Other Future/Regular)</th>
<th>Number of candidates to be provided micro entrepreneurship/self-employment</th>
<th>Brief about self-employment to be provided (in 100 words)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of PhD faculty</th>
<th>Designation/ Title</th>
<th>Contact Number</th>
<th>Official Email ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.