

World Vision International Nepal

**Supplier Registration Form- Vocational Training**

<b>Section 1: General Information</b>						
1- Name of Company (Legal)						
2-Address: District		3- Mailing address (if different)				
VDC/ Ward No						
Postal Code						
Street						
P.O. Box Number						
Country						
4- Telephone		5- Fax				
6- Website		7- Mobile				
8- Contact Name and Title:				9- Email:		
10. Nature of f Business		Public	Trust	Cooperative	Company	Any Other (Please Specift)
<b>Please list your core vocational training offered:</b>		1-		6-		
		2-		7-		
		3-		8-		
		4-		9-		
		5-		10-		
11. Year of established			12. Number of full time staffs			
12. Number of Branch			13. Location:			
14. VAT/ PAN Number:			15. License no./State, where registered			
16. Working Language: English		Nepali		Other		
17. CTEVT affiliation		Yes		NO		
Please attached the CTEVT affiliation certificate						
<b>Section 2: Financial Information</b>						
17. Annual Value of Total Sales for the last 3 Years: (in 000)						
20	NPR	20	NPR	20	NPR	
18. Annual Value of Export Sales for the last 3 Years:						
20	NPR	20	NPR	20	NPR	
Bank Name			A/C Name			
A/C Number			Branch address			
Swift code			Types of A/C			

## a. Registration and Affiliation

1. Registration:	2. Affiliation:
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## 3. Program (Please list all the programs being offered by your Institute)

S.N	Training Programs	Curriculum Approved by	Program Duration	Entry qualification	*Cost per Trainees	Total graduates till now
1	Tailoring /Dress making					
2	Basic cooking					
3	Building electrician					
4	Solar technician					
5	Basic parlor					
6	ECCD/ECD					
7						
8						
9						

**Note:**

\*Cost per student is the total cost charged by institute right from admission to completion of course including tuition fees. Please also attach the cost breakdown for each program in separate sheet

## 4. Human Resource

## a- Teaching Staff \*(Number only)

S.N	Training Programs	Full time	Part time	Total	Remarks
1	Tailoring /Dress making				
2	Basic cooking				
3	Building electrician				
4	Solar technician				
5	Basic parlor				
6	ECCD/ECD				

**Note:** Please provide information regarding name, qualification, trainings and full time /part time nature of all teaching staff in a separate sheet.

## b- Administrative Staff (Number only)

Full time	Part time	Total

**5. Vocational training's graduate details**

Training Programs	Places*	Duration (in hrs.)	2011		2012		2013		2014		2015	
			Total graduate	Participating in Skill Test %	Total graduate	Participating in Skill Test %	Total graduate	Participating in Skill Test %	Total graduate	Participating in Skill Test %	Total graduate	Participating in Skill Test %

\* Mention here if more than two places:  
 % please mentions reason not participating in Skill test:

**5. Employment Status**

SN	Program	Total Graduates till now	% of Employment till now	Sector of Employment		
				Employment	Self Employment	Others

**33. Payment Terms:**Agreed Disagree 

If disagree, Please state your payment terms:

WIN standard payment for supply, service and works contracts is 100% payment within 30 days after delivery of goods and upon receipt of contractors invoice and shipping documents. Prepayment is in general only acceptable against a prepayment guarantee covering the full amount of the prepayment.

**34. CERTIFICATION:**

I, the undersigned, hereby accept the basic Terms and Conditions, a copy of which has been provided to me and warrant that the information provided in this form is correct, and in the event of changes, details will be provided as soon as possible:

\_\_\_\_\_

Signature

Name

Designation

Date

**NOTE:** Completing this form it does not automatically mean suppliers will be added to our Approved Supplier Database. The WVIN reviews and evaluates submissions and contacts prospective suppliers as necessary.