

Rajasthan Skill & Livelihoods Development Corporation

EMI Campus, J-8-B, Jhalana Institutional Area, Jaipur 302004 (Rajasthan) 302004
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F () RSLDC/RSTP/SOP-Sp. Project/2020-21/27180 -

Date 11-01-2021

ORDER

In reference to the RSTP guideline point 13 and sub point 5, following SoP will be applicable for selection of Agencies for undertaking Special/Innovative projects-

Eligibility Criteria: -

Eligibility	Should be a Registered proprietorship/Partnership Firm/LLP/Private Limited Company/Public Limited Company/Trust/Society/ Universities or eminent government aided colleges/Institute operational from last 3 years anywhere in India.
Turnover	Minimum Average Annual Turnover of Rs. 50.0 Lakh from any business in the last three years OR Minimum Average Annual Turnover of Rs. 2.5 Lakh from Skill Development training programs in the last three years
Prior Experience	Should have trained minimum 300 youth and provided placement/self-employment to minimum 150 youth in the last 3 years (In case the minimum average annual Turnover is Rs. 2.5 Lakh)
Type of courses	Any special or Innovative courses which RSLDC has not executed in the past & having better prospects of self/wage employment.
Performance Security	Performance Security Deposit of Rs. 50,000/- (Refundable on successful completion of training and placement) per Skill Development Center (SDC).
Placement	The agency should provide Minimum 50% placement (Self/Wage) of the trained youth.

Any such proposal received at RSLDC or invited with efforts of RSLDC will be scrutinized by Desk Appraisal Committee in terms of eligibility criteria. Eligible project proposal will be placed before the Project Appraisal Committee (PAC) for consideration, If PAC considers proposal as innovative, the Agency will be called for presentation before PAC. On the basis of PAC recommendation, the proposal will be shortlisted for consideration of empanelment and training target allotment. Subsequent to which, an MoU will be signed with selected empaneled agencies for a period of 2 years.

This is issued with the concurrence of competent authority.

Encl: Proposal Format


Managing Director
RSLDC


F () RSLDC/RSTP/SOP-Sp. Project/2020-21/27181-187

Date 11-01-2021

Copy: -

1. PS to Chairman, RSLDC
2. GM- I, II & III, RSLDC
3. CAO, RSLDC
4. DGM-I, II & III, RSLDC

5. All Managers
6. Program Manager-PMCA
7. MIS Cell for web site upload


Scheme OIC
RSTP, RSLDC

**Proposal formats to be used by applicant in reference to SoP
for selection under Special Projects, RSTP**

Checklist for proposal submission under RSTP (For Special Project)

S. No.	Document Description	Page number	
		From	To
1.	Covering Letter as per Annexure-1		
2.	Applicant's Details along with required documents as per Annexure-2		
	Relevant document for Proprietorship/ Partnership Firm/ Private Limited Company/ Public Limited Company/ Society/Trust/Association/Government institutions/Public Sector Units/Universities/eminent government aided colleges/institute having affiliation or recognition of relevant board or council		
	Copy of PAN Card		
	Trade license/ Sales tax registration/IT registration (if any)		
	GST Registration		
3.	Audited Financials (Average Annual Turnover and Average net worth) for last three financial years as per Annexure-3		
	Balance sheet of last 3 years		
	Income Tax Return Acknowledgment for last 3 years		
4.	Details of active skill development centers as per Annexure-4		
5.	Training and Placement details as per Annexure- 5		
6.	An affidavit for not being blacklisted as per Annexure-6		
7.	Affidavit as per Annexure- 7		
8.	Copy of SoP Document with sign and seal of Company Secretary/ Authorized Representative and Signatory on each page of SoP document		

Note: Agency must have to submit SoP documents as per the above checklist.

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

(Organization Seal)

Date:

Annexure -1:

Covering Letter on Letterhead of the Organization with Correspondence Details

To,
The Managing Director
Rajasthan Skills and Livelihood Development Corporation (RSLDC)
J-8 A, Jhalana Institutional Area,
Jaipur-302004

<Location, Date>

We, the undersigned, hereby submitting our proposal against **“SoP for selection of agency under Special Projects, RSTP (Ref:-_____)**

We hereby confirm that:

1. The proposal is being submitted by (name of the agency who is the applicant, in accordance with the conditions stipulated in the above said SoP).
2. We have examined in detail and have understood the terms and conditions stipulated in the SoP Document issued by RSLDC and in any subsequent communication will be sent by RSLDC. We agree and undertake to abide by all these terms and conditions. Our Proposal is consistent with all the requirements of submission as stated in the SoP or in any of the subsequent communications from RSLDC.
3. The information submitted in our Proposal is complete, is strictly as per the requirements as stipulated in the SoP, and is correct to the best of our knowledge and understanding. We would be solely responsible for any errors or omissions in our Proposal. We acknowledge that RSLDC will be relying on the information provided in the Proposal and the documents accompanying such Proposal for empanelment of the applicant for the aforesaid programme and we certify that all information provided in the application is true and correct; nothing has been omitted which renders such information misleading; and all documents accompanying such Proposal are true copies of their respective originals.
4. We acknowledge the right of RSLDC to reject our Proposal without assigning any reason or otherwise and hereby waive, to the fullest extent permitted by applicable law, our right to challenge the same on any account whatsoever.
5. We satisfy the legal requirements and meet all the eligibility criteria laid down in the SoP.
6. This Proposal is unconditional and we hereby undertake to abide by the terms and conditions of the SoP.
7. We have not directly or indirectly or through an agent engaged or indulged in any corrupt practice, fraudulent practice, coercive practice, undesirable practice or restrictive practice.
8. We understand that our proposal will be examined and evaluated by Project Appraisal Committee (PAC) in terms of eligibility and proposed courses and if found suitable, will be recommended for further process.
9. This Proposal is made for expressing our interest for the purpose domain training and employment under RSTP scheme of RSLDC as per following action plan:

S.No	District	No. of SDC	Sectors	Job Role/ Course*	Residential/ Non Residential	Target	Preparedness for implementation of proposed action Plan**

* Write a brief note on how the proposed courses/project has special/unique prospect of self/wage placements?

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** Preparedness plan for Infrastructure, Human resources, tools & equipment's, and other requisites with supportive documents. Agency should provide proof of availability of the SDC in the form of ownership document/ lease agreement. The Proposal Evaluation and Selection Committee may also inspect the premises of each institute for verifying the Infrastructure Presented in the proposal. The documentary proof has to be made available at respective training centers also for verification.

In witness thereof, we submit this Proposal under and in accordance with the terms of the SoP document.

For and on behalf of:

Signature: Name: Designation:

(Authorized Representative and Signatory) (Organization Seal)

Date:

Annexure -2:

Important information and details

Sl. No.	Particulars	Details
1	Name of the Organization:	
2	Registered Address	
3	Correspondence Address	
4	Corporate website URL (if available)	
5	Legal Status (Industry/Federation/Industry Associations/Trust/Society/University etc.)	
6	Incorporation/ Registration status of the Agency	
7	Date of Incorporation/ Registration	
8	PAN Number	
9	GST Registration Number	
10	Name and Designation of the Contact Person	
11	Contact Details (E-Mail and Mobile No.) of the Contact Person	
12	Number of Employees on the Payroll of the applicant organization	

Note: Please provide supporting documents for the above information.

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory) (Organization Seal)

Date:

Annexure -3:

Financial Details

(Declaration by Chartered Accountant on Letterhead with his/her dated Sign and Seal)

To whomsoever it may concern

On the basis of audited financial statements, we hereby certify that (Name of Agency) having registered office at (Office address) has an annual turnover/annual income from various activities including skill development and placement linked programs in the past three consecutive years, The details of annual turnover are mentioned below:

S No	Financial Year	Annual Turnover (INR) in Lakh	Net worth (INR) in Lakh
1			
2			
3			

Note: Audited balance sheet (if available) and ITR for the past three years should be submitted by the Applicant, which must support Annual turnover and net worth.

(Chartered Accountant):

Signature

Name:

Registration No:

Contact No.

Seal

Date:

Annexure -4:

Training Centre Details (In case of applicant has prior experience in organizing skill development related programme)

(Declaration by (Name of Agency) on his/ her organization letterhead with registration number, dated
Sign and Seal by authorized signatory)

For each active skill development center:

S.No.	Particulars	Centre-1	Centre-2	Centre-3	Centre-4	Documentary evidences enclosed (Y/N)
1.	State					
2.	District					
3.	Name of the Scheme					
4.	Capacity of Training Centre					
5.	Residential accommodation capacity (If applicable)					

Note: Please insert separate table for each State (if applicable) and more columns for training centers (if required). Also, please enclose Documentary Evidence regarding training Infrastructure available in the form of Two photos per Training Center, rent/ownership agreement. In the case of training centers with Residential Facilities separate photos for Residential accommodation including facilities such as Kitchen, Dining Hall and Living Room should be provided.

For and behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

(Organization Seal) Date:

Annexure - 5:

Training and placement details (In case of applicant has prior experience in organizing skill development related programme)

Declaration by (Name of Agency) on his/ her organization letterhead with registration number, dated
Sign and Seal by authorized signatory.

Placement Summary:

Financial Year (last 3 years)	Sector	Total Number of candidates trained	Placement provided to number of candidates got trained (Self/Wage)	Detail of supporting document provided (Y/N)

Notes:

Please provide documentary Supporting proof as given below:

For Trainings conducted, self-attested copies of any of the following documents:

- *Documents indicating experience in conducting similar 'Training Program' with number of youths trained (self-attested printouts of verifiable information given by Government or donor agency will be accepted)*
- *Self-attested detailed list of youth trained in proposed sectors*

For Placements/Self-employment conducted, self-attested copies of any of the following documents:

- *Documents indicating experience in conducting similar 'Training Program' with number of youths trained (self-attested printouts of verifiable information given by Government or donor agency will be accepted)*
- *Self-attested detailed list of youth placed with name & contact detail of youth and employer and salary of the candidate.*
- *Self-attested detailed list of youth self-employed with name & contact detail of youth.*
- *Letter from the employer confirming employment of trainees from the institute or agency clearly indicating the date of recruitment, numbers recruited and sector/category of work.*

For and behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

(Organization Seal) Date:

Annexure -6:

An affidavit for not being blacklisted

(An affidavit on a non-judicial stamp paper of minimum 50/- by agency's Secretary/ Authorized Signatory with his/her dated Sign and Seal)

AFFIDAVIT

We, (Name of agency) having its registered office at (office address) do hereby declare that the applicant has not been blacklisted/debarred by any donor agency/ State Government/Central Government authority for breach on our part.

For and on behalf of

Signature:

Name: Designation:

(Authorized Representative and Signatory)

(Organization Seal)

Date:

Annexure -7:

(Affidavit on non-judicial stamp paper by Authorized Representative of the applicant with his / her dated signature and organization seal)

AFFIDAVIT

I/We do hereby certify that all the statements made in our proposal and all the claims /commitments expressed or implied against **“SoP for selection of agency under Special Projects, RSTP (Ref: -)”**

1. The required attachments are true, correct and complete. I / we, am / are well aware of the fact that furnishing of any false information / fabricated document would lead to rejection of my proposal at any stage besides liabilities towards prosecution under appropriate law.
2. I/We, on behalf of (Name of the organization), with its registered office at do hereby declare that the above mentioned enterprise is not under a declaration of ineligibility for corrupt and fraudulent practices or for any other reason, whatsoever and has not been blacklisted / debarred by the Government of India or any of its agencies, including public enterprises and or by any State Government or any of its agencies.
3. I/We on behalf of (Name of the organization) do hereby affirm and undertake that we have carefully read and understood the whole of the scheme Guideline, Circulars, Orders, Notifications, etc. and will unconditionally abide by all the terms and conditions given in the scheme Guideline, Circulars, Orders, Notifications, etc. and process and cost norms of Rajasthan Skills and Livelihood Development Corporation (RSLDC) and also as amended time to time by RSLDC.
4. I/We understand that the proposal inviting authority is not bound to accept any or all proposals that it may receive.
5. I/we hereby give our consent to follow all the norms as stipulated in Guideline of RSTP Scheme, Circulars, Orders, Notifications, etc. of RSLDC (As amended from time to time)

For and on behalf of:

Signature:

Name:

Designation:

Date:

(Organization Seal)