

Expression of Interest (EOI)

EOI No.
RSLDC/PMKVY (State)/EoI/2017-18/01
Date: 09.05.2017

Empanelment of Training Partners to undertake the project under
“Centrally Sponsored and State Managed (CSSM) Component of Pradhan
Mantri Kaushal Vikas Yojna (PMKVY) in the State of Rajasthan”



Rajasthan Skill & Livelihoods Development Corporation

Kaushal Bhawan, EMI Campus, J-8-A, Jhalana Institutional Area, Jaipur – 302004
www.livelihoods.rajasthan.gov.in

RAJASTHAN SKILL AND LIVELIHOODS DEVELOPMENT CORPORATION

Kaushal Bhawan, J-8-A, Jhalana Institutional Area, Jaipur - 302 004

www.livelihoods.rajasthan.gov.in**Expression of Interest (EOI)**

For empanelment of Training Partners to undertake the project under Centrally Sponsored and State Managed Component under Pradhan Mantri Kaushal Vikas Yojna (PMKVY State engagement) in the State of Rajasthan. In first phase, courses only under category I & IV of CSSM PMKVY are being invited.

Background: Rajasthan Skill and Livelihoods Development Corporation (RSLDC) is mandated to implement the short term skill development programmes in the State. RSLDC has been issuing EOIs under various central and state sponsored skill and livelihoods development programs benefiting the unemployed youth of the state and to meet out the demand of skilled manpower in various economic sectors by setting up Skill Development Centers (SDCs). RSLDC is implementing skill training programmes in collaboration with large number of government and private training partners.

Rajasthan has been allocated target under Centrally Sponsored and State Managed Component of Pradhan Mantri Kaushal Vikas Yojna (PMKVY State Engagement). RSLDC is the executing agency for this scheme in Rajasthan. RSLDC invites the Expression of Interest (EOI) from interested and eligible Agencies for submission of proposal for empanelment to undertake project under CSSM component of PMKVY.

| S. No. | Parameters | Conditions/Provisions |
|--------|----------------------|--|
| 1. | Eligibility Criteria | <p>1. The Agency should be a registered Proprietorship/Partnership Firm/Private Limited Company/Public Limited Company/Registered Society/Trust/Association/ Government institutions/ Public Sector Units/Universities/Educational institutes including technical and professional institutes having affiliation or recognition of relevant Board / Council etc.</p> <p>The applying agency will submit the details of project with a covering letter Annexure-1 and submit applicant details with relevant documents as per Annexure-2.</p> <p>All the agencies mentioned above should</p> <p>a) Have been active and operational continuously anywhere in the country for the last three years on the date of application.</p> <p>b) Have average annual turnover of Rs. 50 lakh or more from skill development and placement linked programs OR Rs. 2.5 Crore or more from various activities, in the past three consecutive years (2013-14, 2014-15, 2015-2016). Agency is required to submit copy of audited financials for the last three years along with Annexure-3 OR, Existing Training partners / PIAs already empaneled with RSLDC in ELSTP or DDU-GKY programs would also be eligible for empanelment under this EOI. (The sector specific ELSTP training partners would be eligible to apply only in the allotted sectors) Annexure-3a.</p> <p>c) Have established and run at-least 3 skill development center in the State/UT of India in any of the last three consecutive years. Annexure-4</p> <p>d) Have trained not less than 750 youth and have provided placement to not less than 500 youth in last three consecutive years (Existing training partners of RSLDC should have trained 300 or more youth and have provided placement to 210 or more youth in last 3 consecutive years). Annexure-5</p> <p>e) Not have been blacklisted by any donor agency/ State Government/ Central Government. A self-certificate must be submitted as per Annexure-6.</p> <p>f) Submit a self-declaration on assurance to follow RSLDC & PMKVY norms (as amended from time to time) Annexure-7.</p> <p>g) Submit past performance (program wise) Industry Linkages & basic project plan of PMKVY (CSSM) information as per Annexure-8</p> |

| | | |
|----|------------------------------------|--|
| | | <p>Note:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Joint Ventures (JVs) are also permitted to apply for the program - <ul style="list-style-type: none"> - JV members will be jointly & severally liable. Agreement (undertaking) of JV must be submitted along with the proposal. Further, JV agreement should be submitted before the signing of MoU under the project. - EMD and processing fee should be submitted by the lead partner, if these are provided by 2nd partner than the documents of 2nd partner will also be checked as per the eligibility criteria laid down in the EOI. <p>RSLDC will not be permitting franchisee/subletting of trainings by empaneled partners under CSSM component of PMKVY.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Existing TP/PIAs working with RSLDC may be given preference, however track of consistency / delivery in last 2 years under various schemes of RSLDC will be examined for allotment of targets and empanelment. <input type="checkbox"/> Government institutions shall be exempted from all the eligibility criteria. <input type="checkbox"/> NSDC partner, i.e. where NSDC has a stake, either through equity or loan shall be exempted against the eligibility criteria of financial turnover and experience. |
| 2. | Proposal Processing Fee | <p>All Applicants have to pay a non-refundable Proposal Processing Fee of Rs. 25,000/- (Rupees Twenty Five Thousands only). This will be paid in the form of a Demand Draft Payable to 'Rajasthan Skill and Livelihoods Development Corporation' payable at Jaipur, drawn on any scheduled commercial bank and must accompany with Covering Letter in cover of the Proposal Document. Proposals that are not accompanied by the Proposal Processing Fee shall be rejected by RSLDC.</p> <p><u>Note: Government Institutions / organizations shall be exempted from Processing Fee.</u></p> |
| 3. | Earnest Money Deposit (EMD) | <p>All Applicants are requested to submit a refundable Earnest Money Deposit (EMD) of Rs. 5, 00,000/- (Rupees Five Lakh only). This will be paid in the form of a Demand Draft Payable to 'Rajasthan Skill and Livelihoods Development Corporation' payable at Jaipur, drawn on any scheduled commercial bank and must accompany with Covering Letter in Cover of the Proposal Document. Proposals that are not accompanied by the above Earnest Money Deposit (EMD) shall not be considered.</p> <p>The EMD of the unsuccessful Training Provider would be returned (without interest) within 30 days of decision of rejection. In case of shortlisted Training Provider, the demand draft would remain with RSLDC till signing of MoU.</p> <p><u>The EMD will be forfeited on account of one or more of the following reasons:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> In case, applicant withdraws from an EoI during the period of validity of EoI (EoI shall be valid for 180 days from date of submission of proposal); <input type="checkbox"/> In case, applicant does not participate in the subsequent process of EoI (Presentation before the committee, Signing of MoU) after having been shortlisted. <p><u>Note: Government Institutions / organizations shall be exempted from EMD.</u></p> |
| 4. | Performance Security Deposit (PSD) | <p>The shortlisted agency should furnish a Performance Security Deposit (PSD) of Rs. 100,000 (Rupees One Lakh Only) per allotted skill development centre in the form of demand draft at the time of signing of MoU.</p> <p>Earnest Money Deposit (EMD) can be adjusted against Performance Security Deposit (PSD).</p> <p><u>Note: Government Institutions / organizations shall be exempted from PSD.</u></p> |

| | | |
|---|---------------------------------------|--|
| 5. | Duration of the Project | 2 years initially extendable up to 2 years |
| 6. | Funding Pattern | As per PMKVY's guidelines/RSLDC circulars (as amended from time to time) |
| 7. | Organization of Training | The Applicant has to follow PMKVY's guidelines/ any circular issued by RSLDC pertaining to CSSM component (as amended from time to time) for Training delivery Assessment & Certification, Placement, Tracking, Payment disbursement etc. |
| 8. | Submission of Proposal | <p>Interested agencies fulfilling eligibility conditions as mentioned above can submit their detailed proposal for undertaking Employment Linked Skill Training Programmes in the State to the Managing Director, Rajasthan Skill and Livelihoods Development Corporation (RSLDC) Head Office, Jaipur on or before 09th June, 2017 by 5 PM.</p> <p>The proposal should carry following documents as per checklist given in the EoI:</p> <ol style="list-style-type: none"> 1. Covering Letter-Annexure-I 2. Applicant details along with required documents as per Annexure-2 3. Copy of audited financials for the last 3years along with required documents as per Annexure-3 & 3a. 4. Details of 5 active skill development centers as per Annexure-4 5. Training and Placement details with required documents as per Annexure5 6. An affidavit for not being blacklisted Annexure-6 7. A self-certificate/declaration as per Annexure-7 8. Past performance of conducting similar skill development training in last 3 years Annexure-8 <p>The Managing Director, RSLDC reserves the right to accept or reject any proposal without providing any reason, what so ever. The decision of RSLDC shall be final and binding upon the Company/Agency.</p> <p>For further details, visit website www.livelihoods.rajasthan.gov.in</p> |
| 9. | Mechanism for approval of the Project | <ol style="list-style-type: none"> a) Desk appraisal b) Presentation of the shortlisted applicants before designated committee of RSLDC. c) Evaluation of the proposals by RSLDC at competent level. d) Issuance of sanction order e) The empaneled training partners would be required to sign an MoU with RSLDC for program execution. |
| <p>Note:</p> <ul style="list-style-type: none"> • RSLDC reserves the right to amend courses and guidelines from time to time. • RSLDC has full powers to decide about the number of candidates to be trained in a particular course. Its decision will be binding on all organizations submitting the proposals • The Corporate/Agencies/Organizations which have already signed MoU with RSLDC against general and sector specific EoIs issued earlier are also to apply afresh. <ul style="list-style-type: none"> • In case of any contradiction between scheme guidelines and RSLDC directions the term & conditions of RSLDC will prevail. | | |

For further Contacts & Enquiry:-

1. Sh. Arvind Pandey (Task Manager):- email - naurvind@gmail.com
2. Sh. Rahul Kumar Garg, Manager (H. O.) : -email – rahulgargmgr@gmail.com

Checklist for proposals submitted in response to Expression of Interest (EoI) to undertake the project under Centrally Sponsored and State Managed Component under Pradhan Mantri Kaushal Vikas Yojna (PMKVY) in the State of Rajasthan

| S. No. | Document Description | Page Number |
|---------------|---|--------------------|
| 1. | Covering Letter as per Annexure 1 of EoI document | |
| 2. | Applicant's Details as per Annexure 2 of EoI document | |
| | <ul style="list-style-type: none"> • Relevant document for Proprietorship/Partnership Firm/Private Limited Company/ Public Limited Company/ Society/ Trust/ Association/ Government institutions/Public Sector Units/ Universities/ Higher educational institutes including technical and professional institutes having affiliation or recognition of relevant board or council | |
| | <ul style="list-style-type: none"> • Copy of PAN Card | |
| | <ul style="list-style-type: none"> • Trade license/ Sales tax registration/IT registration (if any) | |
| 3. | Audited Financials for last three consecutive years along with Annexure 3 | |
| | Balance sheet of last 3 years (2013-14) (2014-15) (2015-16) | |
| | Income Tax Return Acknowledgement for last 3 years (2013-14) (2014-15) (2015-16) | |
| 4. | Details of 3 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. | Self-certificate /declaration as per Annexure-7 | |
| 8. | Past Performance, Linkages, Strategy & Best Practices Annexure- 8 | |
| 9. | Copy of EoI Document with sign and seal of Company Secretary/ Authorized Representative and Signatory on each page of EoI document | |

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

Date:

Place:

Annexure -1:
Format of the Covering Letter

<< The Covering Letter is to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal (Letter of authorization is also to be enclosed) >>

To

Managing Director

Rajasthan Skill and Livelihoods Development Corporation
Kaushal Bhawan, J-8A, Jhalana Institutional Area, Jaipur- 302004

Sub: Request for Empanelment under CSSM component in PMKVY as RSLDC training partner for project execution.

Dear Sir,

Please find enclosed Copy of our Proposal in respect of the Empanelment for ‘**Centrally Sponsored and State Managed Component under Pradhan Mantri Kaushal Vikas Yojna (PMKVY) in Rajasthan**’ in RSLDC, in response to the Expression of Interest (EOI) Document issued by the Rajasthan Skill and Livelihoods Development Corporation (RSLDC), dated_____.

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 EOI).
2. We have read the guidelines and EOI document in detail and have understood the terms and conditions stipulated in the EOI Document issued by RSLDC. We agree and undertake to abide by all these terms and conditions along with subsequent communication from RSLDC. Our Proposal is consistent with all the requirements of submission as stated in the EOI or in any of the subsequent communications from RSLDC.
3. The agency has also read the detail guideline of PMKVY (including its various components) issued by MSDE and NSDC and amended from time to time.
4. The information submitted in our Proposal is complete, is strictly as per the requirements as stipulated in the EOI, and is correct to the best of our knowledge and understanding. We would be solely responsible for any errors/omissions/false information 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.
5. 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.
6. We fulfill all the legal requirements and meet all the eligibility criteria laid down in the EOI.
7. This Proposal is unconditional and we hereby undertake to abide by the terms and conditions of the EOI.

8. 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.
9. We are enclosing DDs towards EMD & processing fee as under:

| Item | Amount | DD No. | Date | Bank |
|-----------------------|----------------|--------|------|------|
| EMD | Rs. 5,00,000/- | | | |
| Processing Fee | Rs. 25,000/- | | | |

This Proposal is made for the express purpose of empanelment under PMKVY programme of RSLDC as following action plan:

Proposed Target:

| Name of proposed Districts | Target Proposed | | | # Training Center Proposed |
|----------------------------|------------------|-------------------|-------|----------------------------|
| | Under Category I | Under Category IV | Total | |
| | | | | |

Proposed Course Detail under Category I:

| S.N. | Sector Name | Course Name | Proposed Target |
|------|-------------|-------------|-----------------|
| | | | |
| | | | |
| | | | |

Proposed Course Detail under Category IV (Not more than 20% of total proposed target):

| S.N. | Sector Name | Course Name | Proposed Target |
|------|-------------|-------------|-----------------|
| | | | |
| | | | |
| | | | |

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signature)

Date:

Place:

**Annexure -2:
Applicant Details**

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

| S. No. | Description | Details | |
|--------|---|---------|------------|
| 1 | Name of Legal Constitution of Applicant | | |
| 2 | Status / Constitution of the Firm | | |
| 3 | Name of Authorize Signatory (enclose letter of authorization) | | |
| 4 | Contact address and number | | |
| 5 | Registration Number | | |
| 6 | Date of Registration | | |
| 7 | Place of Registration | | |
| 8 | PAN Card Number | | |
| 9 | Primary point of contact (For all sort of communication purpose) | Email | Contact No |
| | | | |
| 11 | Secondary Point of Contact | Email | Contact No |
| | | | |

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

Date:

Place:

Note: Please provide copy of the registration certificate from the appropriate Registering Authority as given below:

If Company

- Certificate of Incorporation of company

If Proprietorship Firm

- Copy of Certificate of the Proprietorship duly certified by a Chartered Accountant. o
Copy of trade license/sales tax registration/IT registration

If Partnership Firm

- Copy of Registered Partnership Deed / Certificate of the Partnership duly certified by a Chartered Accountant.
- Copy of Registration/Incorporation Certificate and Memorandum and Articles of Association.

If Society / Trust / Association

- Copy of Registration Certificate and Bylaws of Society / Trust / Association.

Note: In addition to above registration certificate, Applicant needs to submit the copy of PAN Card.

Annexure -3:
Financial Details

<< Declaration to be submitted under the signature of 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 average annual turnover of Rs. 50 lakh or more from skill development and placement linked programs **OR** Rs. 2.5 Crore or more from various activities, in the past three consecutive years (2013-14, 2014-15, 2015-2016). The details of annual turnover are mentioned below:

| S. No. | Financial Year | Annual Turnover <i>(From skill development and placement linked programs)</i> | Annual Turnover <i>(From other various activities)</i> |
|--------------------------------|----------------|--|---|
| 1 | 2013-2014 | | |
| 2 | 2014-2015 | | |
| 3 | 2015-2016 | | |
| Average Annual Turnover | | | |

Note: Audited financial statements for the past three years (2013-14, 2014-15, and 2015-2016) should be submitted by the Applicant.

Chartered Accountant:
Signature

Name
Registration No
Contact No.
Seal

Date:
Place:

Annexure -3a:
Empanelment Details for Existing TP/PIA's of RSLDC (ELSTP/DDU-GKY)

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

| S.N. | Particular | Details |
|------|------------------------------|---------|
| 1 | Partner under (Scheme name) | |
| 2 | Sanction Order date & number | |
| 3 | MoU Signing Date | |
| 4 | MoU Valid Up to | |
| 5 | Allotted sectors | |
| 6 | Allotted Districts | |
| 7 | Allotted target | |

*****It is hereby declared that aforesaid MoU between RSLDC and (Applicant agency name) is presently valid and not terminated as on date.***

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signature)

Date:

Place:

Annexure -4:
Training Centre Details

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

For each skill development centre:

| S.N. | Particulars | Details |
|------|--|---------|
| 1. | District/City | |
| 2. | Name of the training Center | |
| 3. | Full address and telephone number | |
| 4. | Nearest landmark | |
| 5. | Sector / courses conducted | |
| 6. | Number of Classrooms (minimum capacity of 25) | |
| 7. | Number of practical rooms | |
| 8. | Separate Wash Rooms for Boys and Girls (Yes/No) Lab infrastructure available | |
| 9.a | Address of residential facility (if applicable) Residential accommodation capacity – Boys (If applicable) | |
| 9.b | Residential accommodation capacity – girls (If Applicable) | |
| 10. | Current Status (Functional or Non-functional) | |

Notes:

1. Please enclose Documentary Evidences regarding training Infrastructure available in the form of:
 - a. 2 photos per Training Center. In the case of training centers with Residential Facilities separate photos for Residential accommodation including facilities such as Kitchen, Dining Hall and Living Room may be provided
 - b. The Training Provider should have its own / rented space and facilities for conducting the Training Programmes. The Training Provider should provide proof of availability of the facility to the Training Provider in the form of ownership document/ lease agreement. In case the facility is proposed to be taken by the Training Provider, document evidencing payment of token advance and/or firm letter of commitment by the owner of the facility along with ownership document shall be provided.
2. The Evaluation 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.

Annexure - 5:
Training and placement details

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

| Financial Year | Total No. of Candidate Trained | Details of Supporting Document enclosed with the proposal | Placement provided to number of candidate got trained | Details of Supporting documents enclosed with the proposal |
|----------------|--------------------------------|---|---|--|
| 2013-14 | | | | |
| 2014-15 | | | | |
| 2015-16 | | | | |

For and on behalf of:

Signature:

Name:

Designation:

(Company Seal)

(Authorized Representative and Signatory)

Date:

Notes:

Please provide Supporting proof as given below:

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

- Certificate from Government bodies or international funding agencies indicating experience in conducting similar 'Placement Linked Training Programme' in the related field of Sector with number of youths trained (self-attested printouts of verifiable information from Government or agency OFFICE/websites or from the funding agencies will be accepted)
- Copies of relevant pages of the fee register attested by a Chartered Accountant.

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

- Certificate from Government bodies indicating experience in conducting 'Placement Linked Training Programme' in the related field of Sector with number of youths placed (self-attested printouts of verifiable information from Government websites will be accepted)
- 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.
- Original Certificate by a Chartered Accountant defining the number of youth placed by the Training Provider during each last three (3) years.

Annexure -6:
An affidavit for not being blacklisted

<< An affidavit on a non-judicial stamp paper of INR 10/- by Company Secretary/ Authorized Representative and Signatory of the Applicant with his/her dated Sign and Seal >>

AFFIDAVIT

We, <<M/s Company name>>, having its registered office at <<Office address>>, do hereby declare that the Applicant hasn't 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)

Date:

Place:

Annexure - 7:
Self-Declaration

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

To whomsoever it may concern

On the basis of registration document/certificates, we M/s (Name of agency), having office at (Office address), hereby give our consent for following as per norms of RSLDC (As amended from time to time):

1. To set-up dedicated Skill Development Center (SDC) as per given specification in the guideline with specified capacity
2. To arrange sufficient space, furniture, equipment, tools, trainers, training aids, raw material, electricity, water supply and other essentials required for imparting training to youth in the proposed course(s).
3. To mobilize and counsel youth for training and taking up a job, wherever available (wage/self-employment) after training.
4. To hire/engage competent and eligible trainer(s) to undertake training in the proposed courses.
5. To install Attendance system and bio-metric devices as per PMKVY guideline
6. To arrange assessment and certification of trained youth through as per PMKVY guideline
7. To arrange employment for trained youth as per PMKVY guideline
8. To ensure tracking of youth as per PMKVY guideline.
9. To maintain records of trainings including the expenditure made for setting up and conducts of skill training programmes for 3 years.

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

Date:

Place:

Annexure -8:

Past Performance, Placement Linkages & Key Project Plan of PMKVY (CSSM)

<< Declaration to be submitted under the signature of Authorized Representative / Signatory of the applicant agency on official Letterhead and official seal >>

1. Training & Placement Performance:

- Provide details of past experience of conducting similar skill development training in last 3 years (FY 2014-15, 2015-16, 2016-17).
- Only trained and certified candidate details to be provided
(Candidate details may be verified on random basis and verification outcome may be used for the proposal Evaluation purpose)

A. Central Govt. Funded Training Programs (excluding PMKVY and STAR)

Table 1: Past Performance - Central Govt. Programs

| S.N. | Project name | Funding Ministry/ Departments | Key description of program | Project duration (Start & End date) | Total Candidates Trained | Total candidates Placed | Placement % (Placed/ Certified) | Total candidates tracked in post placement service (PPS) | Remarks |
|------|--------------|-------------------------------|----------------------------|-------------------------------------|--------------------------|-------------------------|---------------------------------|--|---------|
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

B. State Govt. Funded Training Programs

Table 2: Past Performance - State Govt. Programs

| S.N. | Project name | Funding Ministry/ Departments | Key description of program | Project duration (Start & End date) | Total Candidates Trained | Total candidates Placed | Placement % (Placed/ Certified) | Total candidates tracked in post placement service (PPS) | Remarks |
|------|--------------|-------------------------------|----------------------------|-------------------------------------|--------------------------|-------------------------|---------------------------------|--|---------|
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

C. PMKVY & STAR Schemes

Table 3: Past Performance – PMKVY & Star Schemes

| S.N. | Project name | Funding Ministry/ Departments | Key description of program | Project duration (Start & End date) | Total Candidates Trained | Total candidates Placed | Placement % (Placed/ Certified) | Total candidates tracked in post placement service (PPS) | Remarks |
|------|--------------|-------------------------------|----------------------------|-------------------------------------|--------------------------|-------------------------|---------------------------------|--|---------|
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

D. Industry Sponsored and Paid Training

Table 4: Past Performance – Industry Sponsored & Paid Training

| S.N. | Project name | Funding Ministry/ Departments | Key description of program | Project duration (Start & End date) | Total Candidates Trained | Total candidates Placed | Placement % (Placed/ Certified) | Total candidates tracked in post placement service (PPS) | Remarks |
|------|--------------|-------------------------------|----------------------------|-------------------------------------|--------------------------|-------------------------|---------------------------------|--|---------|
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

2. Industry Linkages:

- Provide placement linkages / tie up's with industries for the purpose of providing placements to the candidate
- Only active linkages / tie-up's in last three years (FY 2014-15, 2015-16 & 2016-17) which led to candidate placements should be reported
- Industry linkage data may be verified on random basis and verification outcome may be used for the proposal evaluation purpose
- Attach supporting documents for the linkages / tie-up's with the industry, i.e signed agreement/contract/ work order/ etc.

Table 5: Industry Linkages

| S.N. | Name of the organization/ company | Contact person name | Contact person designation | Contact person mobile no. | Sector/ trade of company | Job role offered | No. of candidates placed | Remarks |
|------|-----------------------------------|---------------------|----------------------------|---------------------------|--------------------------|------------------|--------------------------|---------|
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |

3. Key plan under PMKVY (CSSM), Rajasthan:

| S.N. | Category | Sectors of Project | Suggested Courses (If any) |
|------|-------------|--------------------|----------------------------|
| 1. | Category-I | | |
| 2. | Category-IV | | |

Note: - The shortlisted applicant will be required to make a detailed presentation to RSLDC about the Program/Project Plan.

For and on behalf of:

Signature:

Name:

Designation:

(Authorized Representative and Signatory)

Date:

Place: