**Bid format (To be submitted in PDF version)**

**State Consultant – Early Childhood Care and Education**

| **Task/ Activity** | **Deliverables** | **Estimated deadline for completion of deliverable (please mention as day required and the month as per the TOR)** | **Estimated travel required for completion of deliverable (please mention destination/ number of days required as per the TOR)** | **Consultant’s proposal**  **Complete timeframe for deliverable** | **Consultants’ proposal**  **Cost (INR) (All inclusive i.e. professional fee, travel, DSA, communication, etc.)** |
| --- | --- | --- | --- | --- | --- |
| Support ECCE team in finalisation of state policy, curriculum, syllabus as per national guidelines | i. Report on support provided to ECCE Council | 31 October 2015  30 days | 4 days  2 districts |  |  |
| ii. Report on State ECCE policy, curriculum & syllabus | 31 October 2015  30 days |  |  |
| Assist in ECCE training – planning and execution of state, district and block level training | Report on ECCE training in Jharkhand | 31 December 2015  60 days | 6 days  3 districts |  |  |
| Support Pre-School Education programme in at least 7 districts of state through material development, training and upscaling | Report on progress of Pre-School Education programme in at least 7 districts of state | 29 February 2016  60 days | 5 days  2 districts |  |  |
| Support development of annual plan for ECCE for Jharkhand with focus on PSE in all AWCs | Annual Plan for upscaling pre-school education in all AWCs in Jharkhand | 31 April 2016  60 days | 4 days  2 districts |  |  |
| Support strengthening of initiatives related to ECI and early screening of children with disabilities | Report on progress of ECI and early screening of children with disabilities | 30 June 2016  30 days | 7 days  4 districts |  |  |
| Documentation of good practices | Documents on good practices related to ECE, PSE and ECI | 30 June 2016  30 days |  |  |

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| *Shaded area to be filled in by consultant* |  |  |  |  |  |
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| **Address:** |  |  |  |  |  |
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| **Contact no.:** |  |  |  |  |  |
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| **Email address:** |  |  |  |  |  |
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| **Date :** |  |  |  |  |  |