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| **Annex 1 – Letter of Interest** |
| This Letter of Interest contains a Declaration that must be completed by parties interested in forming a partnership with NRC. It enables the actors to demonstrate their partnership values and interest with NRC. This form and subsequent supporting documents are then reviewed by NRC to determine if an actor is committed to NRC's values and principles, and to inform partnership selection. |

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| **Name of organization**  |  |
| Type of registration (NGO, CBO, other please mention)  |  |
| Registration | Certificate no |  |
| Date of first Registration  |  |
| Expiry date |  |
| Official address of organisation head office |  |
| Number of permanent staff (Female and Male)  |  |
| Name, position, email & mobile no of primary contact |  |
| Name, position, email and mobile number of secondary contact of organisation |  |

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| **Declaration** | **YES** | **NO** |
| By answering yes, the organization confirms that it is a non-profit entity. |  |  |
| By answering yes, the organization confirms that it is legally registered in the country of implementation. |  |  |
| By answering yes, the organization confirms its commitment to protecting the rights of displaced and vulnerable people during crises, as well as to prohibiting and combating fraud, corruption, sexual exploitation, abuse, and safeguarding violations. |  |  |
| By answering yes, the organization confirms that neither the organization nor any of its members is mentioned on the “Sanctions List”, and that the organization has not supported and does not support, directly or indirectly, sanctioned individuals and entities. |  |  |
| By answering yes, the organization confirms that it is politically, strategically, and programmatically independent. |  |  |
| By answering yes, the organizations confirms that it adheres to humanitarian principles and does not support or provide aid to the military or any other armed groups. |  |  |
| If not registered, please explain why:  |
| I declare, as an official representative of the above-named organization, that the information provided in this declaration is complete and accurate, and I understand that it is subject to NRC verification.By signing this Letter, I express interest to partner with NRC and consequently request the Expression of Interest full package. |
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| Name of the Organisation: | …………………………………………………………. |
| Name and title of the duly authorized Organisation’s representative | …………………………………………………………. |
| Signature  | …………………………………………………………. |
| Date | …………………………………………………………. |

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