







F. No.: HCSSC/EOI/25-26/SDTPIA-TDDW/1

## **DATED 03/10/2025**

## **EXPRESSION OF INTEREST (EOI)-SDTPIA-TDDW**

HCSSC invites proposal for conducting one to three days Skill Development Training Program for Industry and Artisans (SDTPIA)- Technical Design Development Workshops PAN India in the traditional and heritage craft clusters/Industry premises which will directly benefit the industry clusters, artisans and weavers and all the stakeholders of Handicrafts and Carpet Sector in terms of getting skilled manpower trained on latest trends, designs, latest technology and quality parameters. If your organisation is interested to undertake the training programs under the said program on Handicrafts and Carpet Sector qualifications, please fill-in the sheet below and send us back at pc2@hcssc.in.

#### PRIMARY DETAILS

| 1  | Name of the Organization   |  |  |
|----|--|--|--|
| 2  | Address of the Organization (including official email and communication)   |  |  |
| 3  | Organization Type<br>(Industry member/Centre of Excellence/Affiliated<br>Training Partner).  |  |  |
| 4  | Registration No.   |  |  |
| 5  | Date of registration   |  |  |
| 6  | Name & designation of Chief functionary with telephone/mobile  |  |  |
| 7  | Chief functionary e-mail   |  |  |
| 8  | <b>Years of Experience</b> in undertaking developmental interventions in the Handicraft and Carpet sector.   |  |  |
| 9  | No. of Subject Matter Experts/Designers/Trainers available  *(as per the crafts aligned to NSQF and NSQC approved list attached at Annexure 1)  *(Enclose CV/Profile for the same)  *(separate list in excel format name/craft/years of experience to be provided) |  |  |
| 10 | Staff Strength (a separate excel with Name/designation/location and age to be attached)  |  |  |

# DETAILS OF THE INDUSTRY LINKAGES (TO BE PROVIDED BY CENTRE OF EXCELLENCE AND TRAINING PARTNERS ONLY)

| S.<br>No. | Name and<br>Address of<br>the<br>Organization | Contact Details<br>(Name, phone<br>number and email<br>ID) | Scale<br>(Small/<br>Medium/<br>Large) | Number of<br>trainees<br>linked in<br>past one year | Remarks<br>(If any) |
|-----------|---|--|---------------------------------------|---|---------------------|
| 1.        |   |  |                                       |   |                     |
|           |   |  |                                       |   |                     |









#### PAST EXPERIENCE

| 1 | Prior Experience in conducting trainings in          |  |
|---|--|--|
|   | Handicrafts and Carpet Sector (Yes/No). *(If yes     |  |
|   | then attach a separate excel with Statewise/District |  |
|   | wise/craft wise candidates covered)                  |  |
| 2 | Self-declaration on letter head with sign and        |  |
|   | stamp that the organization is not blacklisted by    |  |
|   | any Government (Centre. State, NSDC and other)       |  |
|   | organization   |  |
|   |  |  |

# LIST OF DOCUMENTS TO BE ATTACHED (SELF-ATTESTED COPIES): PAGE NO. OF ATTACHMENT TO BE INDICATED

| 1 | Registration certificate  |  |
|---|---|--|
| 2 | Memorandum of Association & byelaws certified by appropriate authority.                                 |  |
| 3 | Audited balance sheet (by Chartered accountant) for the last three financial years.                     |  |
| 4 | Copy of Annual report for the last three years.   |  |
| 5 | Office bearers of the Organization with their Full name Complete Postal address, Ph/Mob No. and E-mail. |  |

Note: 1) Preference shall be given to those organizations that have affiliation with HCSSC and have prior experience in implementing training programs PAN India including areas such as LWE, Hilly areas and in aspirational districts.

\* HCSSC reserves the right to accept/reject or cancel any or all EOIs/Applications without giving any reasons thereof. HCSSC will not entertain or be liable for any claim for costs and expenses in relation to the preparation of the EOI/Application to be submitted in terms of this Document.