**FORM B**

**Application for empanelment as external organizations with NHSRC**

1. **Organizational details:**

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| --- | --- |
| **Name:** |  |
| **Address/Email/Phone:** |  |
| **Registration details** |  |
| **Brief summary of organization (200 words)**  |
| **Head of organization** |  |
| **Estimated number of staff that can offer consultancy services** |  |

1. **Areas of competence in public health (200 words)**

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1. **Details of relevant public health and health systems related activities undertaken by the organization (upto 10 projects)**

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| --- | --- |
| **Title of project** | **Major activities undertaken (substantiate with publications/reports)** |
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1. **Provide details of upto five potential individual consultants from the organization (in the individual empanelment forms enclosed)**
2. **Please indicate areas of expertise –and interest – for empanelment (from the list provided in Point 2 of the EoI)**