Annex 1: Organizational Data and Internal Controls

**International NGO**

**National NGO**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name/Title of the duly authorized Partner Representative:** | | | | | | | | |  | | | | | | | | | | |
| **Contact Information :** | | | | | |  | | | | | | | | | | | | | |
| **Phone:** |  | | | | | | | | **Fax:** | | |  | | | | | **E-mail** |  | |
| **Address:** | |  | | | | | | | | | | | | | | | | | |
| **Details of Contact Person:**  **(if other than the representative specified above)** | | | | | | | | | |  | | | | | | | | | |
| 1. **Registration** | | | | | | | | | | | | | | | | | | | |
| Legally registered in Lebanon Ministry of Finance and Ministry of Interior (please attach registration certification) | | | | | | | | | | | | | | | | | | | **Yes  No** |
| For International NGO Only: Legally registered in their country of origin | | | | | | | | | | | | | | | | | | | **Yes  No** |
| 1. **Project and Financial Management Systems** | | | | | | | | | | | | | | | | | | | |
| Have the authority to operate bank account in Lebanon? | | | | | | | | | | | | | | | | | | | **Yes  No** |
| In case of a pooled bank account, organization confirms traceability of banking transactions. *Partner may use Separate or Pooled Account provided that the contribution accounting is transparent, traceable and auditable for each transaction and accessible to UNHCR and any other entity duly authorized by UNHCR* | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Accounting System: | | | | **Accounting Software  Maintained in Excel  Manual/Paper based** | | | | | | | | | | | | | | | |
| Have an accounting system that allows for the proper recording/tracking of financial transactions related to UNHCR projects, including allocation of expenditures in accordance with the requirement of partnership agreement. | | | | | | | | | | | | | | | | | | | **Yes  No** |
| If No, please explain the process followed: | | | | | | | | | | | | | | | | | | | |
| General ledger and subsidiary ledgers reconciled and balanced monthly. | | | | | | | | | | | | | | | | | | | **Yes  No** |
| All accounting and supporting documents retained in a defined system that allow access to authorized users. | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Accounting department have appropriate (include adequately qualified and experienced) staff. | | | | | | | | | | | | | | | | | | | **Yes  No** |
| The Organization has appropriate segregation of duties in place for financial transactions and systems. (e.g. segregation of duties for execution of payments, recording of payments and confirmation of goods / services received) | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Following internal control guidelines and Standard Operating Procedures (SOPs):   1. Financial guidelines 2. Anti-fraud and corruption guidelines 3. Human Resources and recruitment guidelines | | | | | | | | | | | | | | | | | | | **Yes  No**  **☐ Yes ☐ No**  **☐ Yes ☐ No** |
| Registered with Lebanon's VAT Department | | | | | | | | | | | | | | | | | | | **Yes  No** |
| If not, Applied for registration on: | | | | | | | | | dd-mm-yyyy | | | | | | | | | | |
| Eligible to get Tax/VAT exemption | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Commit to present UNHCR Net expenditure (not including Tax/VAT) | | | | | | | | | | | | | | | | | | | **Yes  No** |
| If No, Specify Reason: | | | | | | |  | | | | | | | | | | | | |
| Organization conducts periodic Risk Reviews and puts in place risk mitigation measures | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Organization has a business continuity plan that can be activated in case of lockdowns or road closure or political unrest / conflict | | | | | | | | | | | | | | | | | | | **Yes  No** |
| **Briefly describe monitoring and reporting capacities, tools and systems deployed by your organization.** | | | | | | | |  | | | | | | | | | | | |
| **Does the organization have an in-house Audit function or hires an external Audit firm?** | | | | | | | | | | | | | | | | **In-house  External: name of company** | | | |
| 1. **Experience working with UNHCR** | | | | | | | | | | | | | | | | | | | |
| Partnership Agreement with UNHCR Lebanon in the last 5 years | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Have worked with UNHCR in other operations: | | | | | | | | | | | | | | | | | | | **Yes  No** |
| Specify any major operations (up to 5): | | | | | | | | | | | | |  | | | | | | |
| Main Area of Expertise (select all relevant) | | | | | **Legal Protection  SGBV  Child Protection  WASH  Shelter**  **Education  Secondary Health Care  Public Health Care  Basic Assistance  Community Support Project** | | | | | | | | | | | | | | |
| Any Other (specify): | | | | | | | | |  | | | | | |
| 1. **Experience working in the Sector(s) relevant to the Concept Note**   *Please copy this table below to present information on each relevant sector* | | | | | | | | | | | | | | | | | | | |
| Sector: | | |  | | | | | | | | | | | | | | | | |
| Brief description of recent project(s) implemented in the area *Indicate the project location* | | | | | | | | | | |  | | | | | | | | |
| Active participation in (LCRP) Sector Working Group | | | | | | | | | | | | | | | **Yes  No** | | | | |
| Currently reporting on Activity Info within the framework of the Inter-agency Coordination platforms. | | | | | | | | | | | **☐ Yes ☐ No** | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **Name/title of the duly authorized Partner** | **Signature** | **Date** |

Annex II: UN Implementing Partner PSEA Capacity Self-Assessment

|  |  |  |  |
| --- | --- | --- | --- |
| **Standard** | **Yes** | **No** | **Supporting documentation may include** |
| **1: Organizational Policy**  Required: The organization has a policy document on PSEA. At a minimum, this document should include a written undertaking that the partner accepts the standards in ST/SGB/2003/13.  **(UN IP Protocol para 15 & Annex A.4)** | ☐  1 point | ☐  0 points | * Code of Conduct (internal or interagency) * PSEA policy * Documentation of standard procedures for all personnel to receive/sign PSEA policy * Other (please specify): |
| Comments: | |
| **Standard** | **Yes** | **No** | **Supporting documentation may include** |
| **2: Organizational Management**  Required: The organization’s contracts and partnership agreements include a standard clause requiring sub-contractors, to adopt policies that prohibit SEA and to take measures to prevent and respond to SEA.  **(UN IP Protocol para 11; 15; & Annex A.1)** | ☐  1 point | ☐  0 points | * Contracts/partnership agreements for sub- contractors * Other (please specify): |
| Comments: | |
| **Standard** | **Yes** | **No** | **Supporting documentation may include** |
| **3: Human Resources Systems**  Required: There is a systematic vetting procedure in place for job candidates through proper screening. This must include, at minimum, reference checks for sexual misconduct and a self- declaration by the job candidate requesting that they confirm that they have never been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to SEA, or left employment pending investigation and refused to cooperate in such an investigation. **(UN IP Protocol para 11; 15; & Annex A.2)** | ☐  1 point | ☐  0 points | * Reference check template including check for sexual misconduct (including reference from previous employers and self-declaration) * Recruitment procedures * Other (please specify): |
| Comments: | |
| **Standard** | | **Yes** | **No** | **Supporting documentation may include** |
| **4: Mandatory Training**  Required: The organization holds mandatory trainings (online or in- person) for all personnel on PSEA and relevant procedures. The training should include: 1) a definition of SEA (that is aligned with the UN's definition); 2) explanation on prohibition of SEA; and 3) actions that personnel are required to take (i.e. prompt reporting of allegations and referral of victims).  **(UN IP Protocol para 17 & Annex A.5)** | | ☐  1 point | ☐  0 points | * Annual training plan * Training agenda * Training package * Attendance sheets * Training certificates * Other (plase specify): |
| Comments: | |
| **Standard** | | **Yes** | **No** | **Supporting documentation may include** |
| **5: Reporting**  Required: The organization has mechanisms and procedures for personnel, beneficiaries and communities, including children, to report SEA allegations that comply with standards for reporting (i.e. safety, confidentiality, transparency, accessibility).  **(UN IP Protocol para 19 & Annex A.3)** | | ☐  1 point | ☐  0 points | * Internal Complaints and Feedback Mechanism * Participation in joint reporting mechanisms Communication materials * PSEA awareness-raising plan * Description of reporting mechanism Whistle-blower policy * Other (please specify): |
| Comments: | |
| **Standard** | | **Yes** | **No** | **Supporting documentation may include** |
| **6: Assistance and Referrals**    Required: To be consistent with the IP Protocol and other  UN SEA instruments, the organization has a system to refer SEA victims to available support services available locally, based on their needs and consent. This can include active contribution to in-country PSEA networks and/or GBV systems (where applicable) and/or referral pathways at an inter-agency level.    **(UN IP Protocol para 22.d.)** | | ☐  1 point | ☐  0 points | * Internal or Interagency referral pathway * List of available service providers * Description of referral or Standard Operation Procedure (SOP) * Referral form for survivors/victims of GBV/SEA * Guidelines on victim assistance and/or training on GBV and GBV case management principles * Other (please specify): |
| Comments: | |
| **Standard** | | **Yes** | **No** | **Supporting documentation may include** |
| **7: Investigations**    Required: The organization has a process for investigation of allegations of SEA and can provide evidence. This may include a referral system for investigations where in house capacity does not exist.    **(UN IP Protocol para 20, 23 and 24, & Annex A.6)** | | ☐  1 point | ☐  0 points | * Written process for review of SEA allegations * Dedicated resources for investigation(s) and/or commitment of partner for support * PSEA investigation policy / procedures * Contract with professional investigative service * Other (please specify): |
| Comments: | |
| **Standard** | | **Yes** | **No** | **Supporting documentation may include** |
| **8: Corrective Action**    Required: The organisation has taken appropriate corrective action in response to SEA allegations, if any.    **(UN IP Protocol para 20, 22.a., & Annex A.6)** | | ☐  1 point | ☐  0 points | * Evidence of implementation of corrective measures identified by the UN partner entity, including capacity strengthening of staff. * Specific measures to identify and reduce risks of SEA in programme delivery. * Other (please specify): |
| Comments: | |

|  |  |  |
| --- | --- | --- |
| **Name/title of the duly authorized Partner** | **Signature** | **Date** |

Annex III: Partner Procurement Capacity Self-Assessment

|  |  |  |  |
| --- | --- | --- | --- |
| Please describe your organization’s capacity and capability for undertaking procurement at the required scale, including prior experiences and value of procurement. Describe your procurement staffing structure, if currently in place, including applicable years of experience and internal controls within your organisation surrounding procurement. Indicate whether you have relevant tax exemption on procurement for humanitarian purposes when providing assistance to our persons of concern. [Where necessary, confirm that your organization has applied for, or holds, prequalification for procurement] | | | |
| 1. *Were the procurement requirements clearly mentioned in the “Concept Note”?* |  | | |
| 1. *What professional experience and capability does the organization have for undertaking procurement at the required scale?* | Is there a functioning procurement unit at an operational level? | | * Yes * No |
| Does the organization have up to date and approved procurement policies and procedures? | |  |
| Number of International Staff | |  |
| Number of National Staff | |  |
| Average years of professional experience of the procurement staff | |  |
| 1. *What is the anticipated procurement size and nature required for implementing the project in 2020?* | Procurement type | | * Goods * Services * Construction works |
| Procurement | | * International * Local |
| Specify item for  procurement | |  |
| Specify the value US$ | |  |
| 1. *Please provide a brief description of what is to be procured* |  | | |
| 1. *Does the organization have a demonstrated experience in undertaking procurement of a similar size and nature over the past three years?*   *Please provide specific* ***examples****.* | Procurement type | |  |
| International Procurement  (Value US$ per year) | |  |
| Local Procurement  (Value US$ per year) | |  |
| Number of relevant projects | | * UNHCR * other UN agencies * other agencies: |
| 1. *Does the organization have a clean audit opinion and verification record related to procurement activities in the past two years?* | * Audited by external audit firm | | |
| Specify audit firm |  | |
| Year of audit |  | |
| Opinion |  | |
| * Audited by UNHCR | | |
| Year of audit |  | |
| Opinion |  | |
| 1. *The organization is assessed as:* | * Pre-qualified by UNHCR: * Date of PQP-notification: * Pre-qualified by another UN agency * Namely: * Date of pre-qualification: * Not pre-qualified. * Not pre-qualified but the corresponding application is under evaluation by UNHCR Procurement Services * Not pre-qualified but has good potential and is ready. | | |
| 1. *Does the organization have VAT/sales tax exemption?* | * Yes * No | | |
| 1. *Any other comments?* |  | | |

|  |  |  |
| --- | --- | --- |
| **Name/title of the duly authorized Partner** | **Signature** | **Date** |