RFA Respondents Survey

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| --- | --- |
| Applicant Legal Name: |  |
| Applicant Address: |  |
| Applicant Telephone: |  |
| Applicant Email Address: |  |
| Applicant Website: |  |
| Applicant UEI: |  |
| Applicant Point of Contact Name: |  |
| Applicant Point of Contact Title: |  |
| Country of Performance: |  |

1. What type of organization are you? (*Please check all that apply*)

Not-for-profit

For-profit

University/Educational Institution

Other (Please describe: Click or tap here to enter text.)

1. Is your organization legally affiliated with any other organization or company?

Yes  No

If “Yes,” please explain the nature of the affiliation (include legal relationship, years and name and location of the affiliated entity): Click or tap here to enter text.

1. What GHS technical areas do you focus on? (*Please check all that apply)*

Risk Communication  
 Social Behavior Change  
 Community Engagement  
 Zoonotic Disease  
 Community Based Zoonotic Disease Surveillance  
 Workforce Development (Public Health sector)  
 National Laboratory System  
 Antimicrobial Resistance (AMR)  
 Outbreak Preparedness and Response  
 Other (Please list sectors outside of those listed above)

1. What geographic areas does your organization serve?
2. Is your organization led by someone (CEO, Director, owner) who self-identifies as a woman or is a minority (someone who lives with a disability, is a refugee, identifies as part of the LGBTQI+ community, etc.)?
3. How long has your organization been established?
4. Approximate number of current long-term or part-time employees:

Full-time: Click or tap here to enter text.

Part-time: Click or tap here to enter text.

1. What is your organization’s annual operating budget? (Provide previous year’s budget or, if more appropriate, an average of the previous three years)
2. Has your organization previously managed donor-funded projects (such as U.S. government, European Union, World Bank, United Nations or other donors including foundations)?

Yes No

If yes, please list up to 3 projects on which you performed during the last 3 years. Please include project name, country, total award value of your contract/ subcontract/ agreement /sub-agreement, start and end dates, and your role:

Project 1

Agency Name: Click or tap here to enter text.

Project name: Click or tap here to enter text.

Country: Click or tap here to enter text.

Total award value: Click or tap here to enter text.

Start and end dates: Click or tap here to enter text.

Your /organization's role *(prime contractor/recipient, subcontractor/subrecipient):*

Prime Contractor/Recipient

Subcontractor/Subrecipient

Other

If other, please describe: Click or tap here to enter text.

Project 2

Agency Name: Click or tap here to enter text.

Project name: Click or tap here to enter text.

Country: Click or tap here to enter text.

Total award value: Click or tap here to enter text.

Start and end dates: Click or tap here to enter text.

Your /organization’s role *(prime contractor/recipient, subcontractor/subrecipient):*

Prime Contractor/Recipient

Subcontractor/Subrecipient

Other

If other, please describe: Click or tap here to enter text.

Project 3

Agency Name: Click or tap here to enter text.

Project name: Click or tap here to enter text.

Country: Click or tap here to enter text.

Total award value: Click or tap here to enter text.

Start and end dates: Click or tap here to enter text.

Your /organization's role *(prime contractor/recipient, subcontractor/subrecipient):*

Prime Contractor/Recipient

Subcontractor/Subrecipient

Other

If other, please describe: Click or tap here to enter text.