STTA Pool Expression of Interest

Please complete all details in this Expression of Interest and email this annex and your CV to sparc@developmentpathways.co.uk with the subject line ‘EoI STTA Pool’ by no later than 5:00pm AEDT **Friday, 13 December 2024**.

Please ensure you have read the Terms of Reference for the STTA Pool before completing the Expression of Interest. Questions can be directed to sparc@developmentpathways.co.uk.

All personal information will be collected and stored in accordance with Australian privacy laws.

Part 1: Contact information

|  |  |
| --- | --- |
| Personal information |  |
| Name | First LAST |
| Email address | Email address |
| Phone number(s) (include country and area codes) | Phone number(s) |

Part 2: Skills & experience

Technical skills & experience

The range of skills and experience sought for the STTA Pool are outlined in section 4.3 of the STTA Pool Terms of Reference.

In the table below, please indicate your area(s) of expertise and years’ experience.

|  |  |  |
| --- | --- | --- |
| Area of Expertise | Subject Matter Expert | Years of experience  |
| Social Protection Policy and Strategy | [ ]  Yes [ ]  No |  |
| Social Protection Operations and Delivery Systems | [ ]  Yes [ ]  No |  |
| Shock-Responsive Social Protection and Humanitarian Response | [ ]  Yes [ ]  No |  |
| Gender Equality | [ ]  Yes [ ]  No |  |
| Disability Inclusion  | [ ]  Yes [ ]  No |  |
| Social Inclusion  | [ ]  Yes [ ]  No |  |
| Climate Change | [ ]  Yes [ ]  No |  |
| Community-Driven Development | [ ]  Yes [ ]  No |  |
| Poverty Alleviation  | [ ]  Yes [ ]  No |  |
| Livelihoods | [ ]  Yes [ ]  No |  |
| Health | [ ]  Yes [ ]  No |  |
| Education | [ ]  Yes [ ]  No |  |
| Other (Please specify) | [ ]  Yes [ ]  No |  |

In the table below, please provide a summary of your experience in your area of subject matter expertise. If you have subject matter expertise in more than one area, please complete for each area (up to 4 areas).

Subject Matter Expertise – 1

|  |
| --- |
| **Area:** Click here to select an option**Summary (no more than 500 words):**Click or tap here to enter text. |

Subject Matter Expertise – 2

|  |
| --- |
| **Area:** Click here to select an option**Summary (no more than 500 words):**Click or tap here to enter text. |

Subject Matter Expertise – 3

|  |
| --- |
| **Area:** Click here to select an option**Summary (no more than 500 words):**Click or tap here to enter text. |

Subject Matter Expertise – 4

|  |
| --- |
| **Area:** Click here to select an option**Summary (no more than 500 words):**Click or tap here to enter text. |

Geographic experience

Please indicate which countries you have experience working in.

|  |  |  |
| --- | --- | --- |
| Region |  | Years’ Experience |
| Asia | [ ]  Yes [ ]  No If yes, please specify which countries: | Number of Years |
| Pacific | [ ]  Yes [ ]  NoIf yes, please specify which countries: | Number of Years |
| Other | [ ]  Yes [ ]  NoIf yes, please specify which countries: | Number of Years |

Part 4: Daily rate

Please provide an indication of your expected daily rate for the delivery of services.

**Please note**: Consultant’s expected daily rate, as specified in this Expression of Interest, is not guaranteed. Each position is classified at a daily rate, depending on the professional discipline, the job level of the input, and the duties, responsibilities, and skills required.

|  |  |
| --- | --- |
| Daily rate | AUD (exclusive of all taxes) |
| What is your expected daily rate?  | Click or tap here to enter text. |

Part 5: Other information

|  |  |
| --- | --- |
| Other information |  |
| Are you proficient in languages other than English?  | [ ]  Yes [ ]  No |
| If yes, please indicate which languages and your level of proficiency. | Click or tap here to enter text. |
| Are you of Australian Aboriginal and/or Torres Strait descent? | [ ]  Yes [ ]  No [ ]  Prefer not to say |
| Are you from Asia, Pacific Island Country or Timor-Leste? | [ ]  Yes [ ]  No [ ]  Prefer not to say If yes, please specify which country: |
| Do you identify as a person with disability? | [ ]  Yes [ ]  No [ ]  Prefer not to say  |
| Do you have any accessibility needs? | [ ]  Yes [ ]  No [ ]  Prefer not to sayIf yes, please specify: |
| Is there anything that we should be aware of that may raise concerns during your due diligence screening? | [ ]  Yes [ ]  No [ ]  Prefer not to say If yes, please provide further details: |
| Are you available to travel? | [ ]  Yes [ ]  No  |

Declaration

I Insert First Name, LAST NAME declare that the information contained in this Expression of Interest is true and correct. I have read and understood the Terms of Reference and its annexes. If I am shortlisted and progress to stage two as detailed in section 5.2.2 of the Terms of Reference, I agree to provide the programs with the requisite additional documentation within seven (7) days of my appointment to the STTA Pool (no later than 5:00pm AEDT, **Monday, 27 January 2025**).

**Signature**:

**Date**: Click or tap to enter a date.