



Project Reference: “Enhancing the Capacity of Intermediary Business Organizations in Nepal” (ECIBON)
 Project funded by the European Union and Implemented by European Economic Chamber (EEC) - Nepal
 under Asia-Invest Program

Evaluation checklist for the selection of 15 direct beneficiaries

Please fill the following information

Section A - General Information

A. Name of the IBO:

B. Contact address:.....

Tel No:..... Fax.....

E-mail:.....

C. Name of the contact person (one each)

From Executive Board:

From Secretariat:

D. Geographical Region:

ER-M	MR-M	WR-M	MER-M	FWR-M
ER-H	MR-H	WR-H	MER-H	FWR-H
ER- T	MR - T	WR- T	MER- T	FWR- T

ER= Eastern Region

WR= Western Region

FWR= Far Western Region

MR= Mid Region

MWR= Mid Western Region

M- Mountain

H- Hill

T- Terai

Section B- Information for Evaluation

1. Establishment date:Year.....Month (please attach a copy of registration certificate)

(0-3 = 3; 3-5=6; 5+years= 10)

2. Office setup **(2.5 for each of the followings)**

- i. Secretariat office
- ii. Telephone
- iii. Computer
- iv. Internet/ email

3. Human resource

- i. Available for participation in the ECIBON Program from Executive Committee
 - a. Graduate – **(5)** b. Undergraduate- **(3)** c. English literate –**(2)**
- ii. Available for participation in the ECIBON Program from Secretariat
 - a. Graduate – **(5)** b. Undergraduate- **(3)** c. English literate –**(2)**

4. Membership status

- a. On the basis of number
 - i. More than 51 **5**
 - ii. 26-50 **3**
 - iii. Up to 25 **2**
- b. Members’ product/ service having export potential to EU market or already have working relationship with companies in the EU. **(if “Yes” -5)**

- i. Yes
- ii. No

Performance of the organization

- a.** Program/ activities carried out by the organization over last three years – **3**
(Please attach supporting document)
- b.** Financial capabilities (Please attach balance sheet of last three years) – **3**
- c.** Please include your willingness to learn from the project and co-operate ECIBON Project. –**2**
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- d.** How do you utilize the project’s support regarding capacity building after participating as project beneficiary? –**2**

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Section C- Other information

a. What are the future activities you are planning for next three years?

(Please add additional sheet if required)

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b. What is the potentiality in terms of trade and commerce of your region?

(For example Pokhara= Tourism, Ilam = tea etc.)

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Score Sheet

Q. No.	Score
1	
2-i	
2-ii	
2-iii	
2-iv	
3-i	
3-ii	
4-a	
4-b	
5 -a	
5- b	
5-c	
5-d	
Total	