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DENTAL COUNCIL OF INDIA

(A Statutory Body under the Govt. of India, MOH&FW)

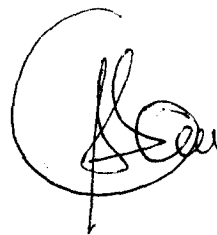
Aiwan-E-Galib Marg, Kotla Road, New Delhi-110 002

Request for Expression of Interest (EOI) for providing Content and Providing Remote Access From Interested parties for E-Consortium of Journal on Medical & Dental Health Science

The Dental Council of India intends to launch an E-Consortium for E-Consortium of Journal on Medical & Dental Health Sciences primary focus on Dental subjects, for which interested parties are invited to submit their Expression of Interest (EOI) for Providing Content and for Providing Remote Access/Hosting in the prescribed format at "Annexure-1&2" available on our website i.e. www.dciindia.org.in.

The EOI's should be submitted only in a sealed envelope super scribed as "Expression of Interest for E-Consortium" and addressed to "The Joint Secretary (L&A), Dental Council of India, 1st Floor, Combined Council Building, Aiwan-E-Galib Marg, Kotla Road, Opp. Mata Sundri College for Women, New Delhi-110002" and should reach this office latest by 25.05.2018 at 5:00 p.m. Thereafter, no EOI shall be entertained.

Secretary
Dental Council of India



EOI Submission Form

Content Providing for E- Consortium of Medical/Dental Journals

1. Background

1.1 Contact Details

Name of the Company	
Mailing Address	
E-Mail	
Telephone	
Fax	
Website	

1.2 Legal Registration (if any)

Place of Registration & Registration No.	Date of Incorporation	Director's Name

1.3 GST/TIN No. _____ Registration Date _____

2. Previous Experience

2.1 Geographical coverage and experience working with organizations

Criteria	Response
Geographical list showing where work has been done in the past three years	
Previous experience in working with other organization	

2.2 Outline of assignment relevant to this present EOI that were completed by the bidder within last three years.

Name of client and contact details	Description of Assignment	Completion date

2.3 Details of current assignments in progress

Name of client and contact details	Description of Assignment	Completion due date

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3. Proposed details of the assignment

Procedure of your company to provide content for such type of E- Consortium	
Your role in managing the content and updating the content	
Your role in conducting polls, surveys, reporting and analytics of the content provided	
Role of the organizer (DCI)	
Device compatibility	
Technical requirement for accessing the content.	
Nature of the content provided Pdf/Presentations/Pre recorded videos/ chat based questions.	

4. Any other information

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5. Certification

I, the undersigned, warrant that the information provided in this form is correct and, in the event of changes, details will be provided as soon as possible.

Name

Functional Title

Signature

Date

Company Seal/ Stamp

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EOI Submission Form

Hosting/Remote Access of Digital E-Consortium

1. Background

1.1 Contact Details

Name of the Company	
Postal Mailing Address	
E-Mail	
Telephone	
Fax	
Website	
Contact Person Name	

1.2 Legal Registration (if any)

Place of Registration & Registration No.	Date of Incorporation	Director's Name

1.3 GST/TIN No. _____ Registration Date _____

2. Previous Experience

2.1 Geographical coverage and experience working with organizations

Criteria	Response
Geographical list showing where work has been done in the past three(03) years	
Previous experience in working with other Government organization/private organization (mention both)	

2.2 Outline of assignment relevant to this present EOI that were completed by the bidder within last three years.

Name of client and contact details	Description of Assignment	Completion date

2.3 Details of current assignments in progress

Name of client and contact details	Description of Assignments	Completion due date

3. Proposed details of the assignment

Procedure of your company to host such type of Remote Access	
Your role in managing schedules/sending invitations	
Role of attendees	
Role of panellist	
Your role in conducting polls, surveys, resorting and analytics of the Remote Access user.	
Role of the organizer (DCI)	
Device compatibility	
Audio/Video conference integration	
Deferred line/ uploading videos in a portal/digital library	
Presentations/ Pre recorded videos/ chat based questions	
Mode of Hosting and Technical Details	

4. Any other information

5. Certification

I, the undersigned, warrant that the information provided in this form is correct and, in the event of changes, details will be provided as soon as possible.

Name

Functional Title

Signature

Date

Company Seal/ Stamp