

REQUEST FOR APPLICATIONS

My Journey Adolescent and Young People Programme

PROJECT	Implementation of the My Journey Adolescent and Young People Programme		
REFERENCE	RFA-NACOSA-01-2025	DATE	18 August 2025
SUMMARY	NACOSA is inviting interested non-profit organisations, experienced in providing biomedical services to adolescents and young people (age group: 15-24), to apply to be a Sub-Recipient (SR) in a performance-based grant. Applicants are required to currently have a footprint in the relevant district to be considered.		
QUESTIONS	Questions can be addressed by email only to RFAQueries@nacosa.org.za with the reference in the subject line on or before 3 September 2025 .		
BRIEFING	A Non-Compulsory Briefing Session to be held virtually via Microsoft Teams on 26 August 2025 at 10:00 am- 12: 00 pm (SAST). Contact RFAQueries@nacosa.org.za as an expression of interest to attend.		
DEADLINE	All proposals to be submitted to RFASubmissions@nacosa.org.za with the reference in the subject line, no later than 13:00pm (SAST) on 5 September 2025 .		
DOCUMENTS	- Terms of Reference: Request for Applications - Application form		

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PLEASE NOTE: Any updates to this RFA and related documents will be posted on NACOSA's website.

NACOSA

Networking HIV & AIDS Community of Southern Africa NPC
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NPO 190-030 | PBO 930056308
Level 2 B-BBEE Entity | VAT 4730273234
Health & Welfare SETA HW591PA128468 Services
SETA 13833 | Education, Training & Development
Practices SETA ETDP51482 | Quality Council for
Trades & Occupations QCTOSDP01190709-1737

ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
AGYW	Adolescent Girls and Young Women
AYP	Adolescents and Young People
ART	Anti-Retroviral Therapy
B-BBEE	Broad-Based Black Economic Empowerment
CCM	Country Coordinating Mechanism
CET	Community Education and Training
CSO	Civil Society Organisation
CT	Country Team
DCA	Demand Creation Agent
DOH	Department of Health
GBV	Gender Based Violence
GF	Global Fund
GF CCM	Global Fund Country Coordinating Mechanism
HWC	Health and Wellness Counsellors
HIV	Human Immunodeficiency Virus
HIVSS	HIV Self Screening
HTS	HIV Testing Services
KP	Key Population
KPP	Key Priority Populations
LGBTQ+	Lesbian, gay, bisexual, transgender, and queer/questioning individuals
M&E	Monitoring and Evaluation
MOU	Memorandum of Understanding
MSP	Male Sexual Partner
NACOSA	Networking HIV/AIDS Community of Southern Africa
NIMART	Nurse Initiated Management of Anti-Retroviral Therapy
NPC	Non-Profit Company
PEP	Post Exposure Prophylaxis
PLHIV	People Living with HIV
PrEP	Pre-Exposure Prophylaxis
PVC	Post Violence Care
PR	Principal Recipient
PSE	Population Size Estimate
PSEAH	Prevention of Sexual Exploitation, Abuse and Harassment
RFP	Request for Proposals
SARS	South African Revenue Service
SBCC	Social Behaviour Change Communication
SMT	School Management Teams
SR	Sub-Recipient
SRHR	Sexual Reproductive Health Rights
SSP	SR Selection Panel
STI	Sexually Transmitted Infection
TB	Tuberculosis

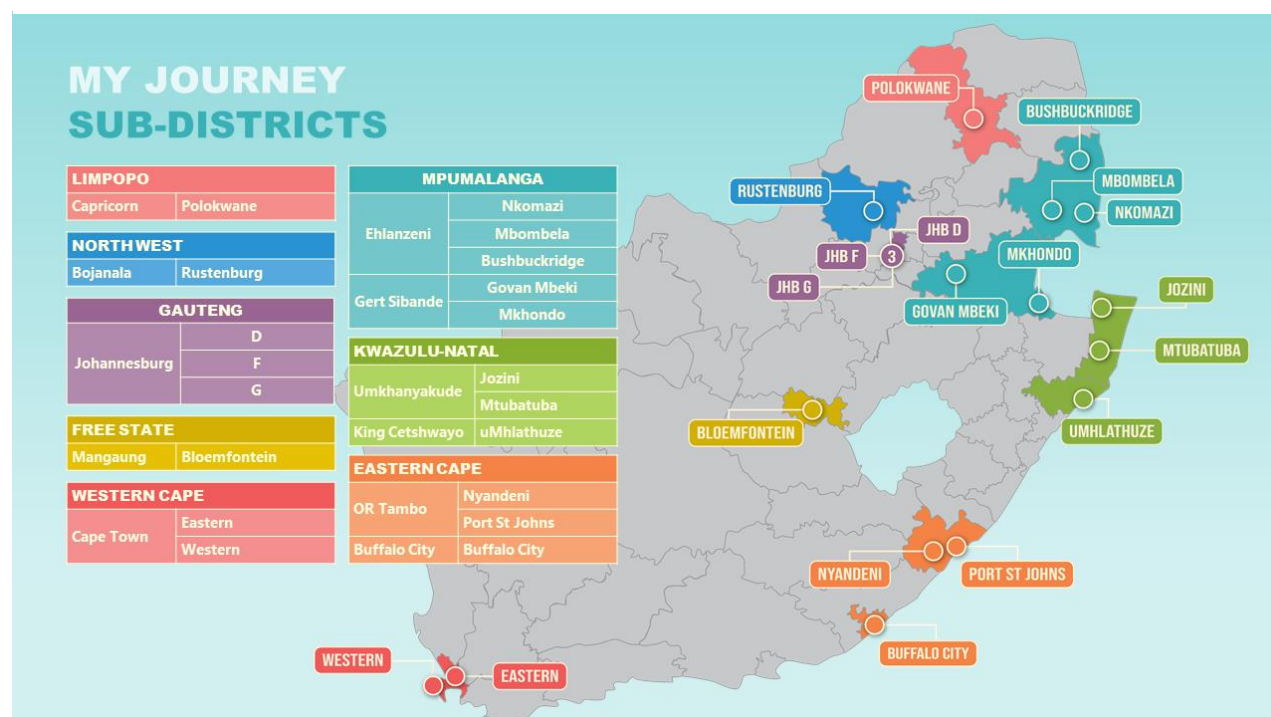
1. INTRODUCTION

The Networking HIV and AIDS Community of Southern Africa (NACOSA) has been appointed as a principal recipient (PR) of the Global Fund to be responsible for the delivery of the My Journey national Adolescent and Young People programme from **1 October 2025 – 31 March 2028**. The My Journey programme will be offered in **19 sub-districts in 11 districts across 8 provinces** aiming to reach **384,284** adolescent girls and young women over the grant cycle. NACOSA will serve as the grant manager while sub-recipient organisations (SRs) will be implementing the programme in communities. The South Africa Country Coordinating Mechanism (CCM) provides oversight to the implementation of HIV and TB programmes funded by the Global Fund in the country. The CCM defines the content of this programming, the budget and the output and outcome indicators and targets.

According to the latest UNAIDS Global AIDS Update, adolescent girls and young women aged 15–24 years continue to bear the brunt of HIV in sub-Saharan Africa, accounting for 28% of new HIV infections. In South Africa, all women face a disproportionate HIV burden but the gender disparity is most pronounced among adolescent girls and young women between 15 and 24 years, whose HIV prevalence is 3.3 times greater than their male peers. High community viral loads, low condom use and pervasive socio-economic drivers of HIV among young women make it critical to prioritise interventions for high-risk adolescent girls and young women. While new tools such as long-acting PrEP offer an opportunity to make significant strides in the HIV response, significant funding cuts have necessitated a reprioritisation of budgets to focus on the most cost-effective interventions for the most at-risk groups.

NACOSA is looking to appoint up to ten (10) sub-recipients to implement the programme in the sub-districts shown in *Figure 1* below, this will be subject to the outcome of the selection process.

Figure 1: My Journey Programme Sub-districts 2025-2028



Applicants do not need to submit implementation plans and budgets as part of this call for applications.

2. ROLE AND REQUIREMENTS

Sub-recipients have a contractual relationship with, and are accountable to the principal recipient (NACOSA). They are the direct implementers of programmes financed by the Global Fund. The responsibilities of the sub-recipient organisations are:

- Sign grant agreements with the PR that specify the grant objectives, performance framework and budget.
- Implement grants under the oversight of the PR and CCM and take responsibility for their performance.
- Perform and achieve the set numeric targets as per signed contract
- Propose changes to the PR on workplans and budgets when necessary
- Select, appoint and manage appropriately qualified human resources needed to implement the programme in an effective and efficient manner
- Use PR provided Information Management System for data reporting and analysis
- Collaborate with and participate in the relevant sub-district and district stakeholders and structures such as government departments, SANAC sectors, local and district AIDS Councils ensuring that grant implementation contributes to broader local implementation plans.
- Provide information to the PR, Global Fund Country Team, and CCM and its structures, and other relevant government entities when requested to do so.
- Participate in performance review meetings to improve grant performance and impact.
- Report on programme and finance performance and challenges to the PR through regular reports.
- Ensure timely submission of progress reports to the PR on programme indicators, targets, work plans and related financial accountabilities, as stipulated in the PR- SR contract
- Identify key issues and implementation bottlenecks and escalate to the PR for guidance.

REQUIREMENTS

- Legal status such as voluntary association, trust, non-profit company (NPC) to enter contracts.
- Sound leadership and governance frameworks, demonstrated by a constituted, diversified board and management team, and three (3) years of audited financial statements.
- Appropriate internal control systems, including policies and procedures, to prevent and detect fraud or misuse of resources.
- Appropriate skilled and experienced staff in key areas (programme and financial management, human resources, programme implementation and management, monitoring and evaluation and procurement management) – preferably recruited from the target sub-district/s.
- A track record of effective and efficient implementation of youth programmes, preferably in the target sub-districts and with an implementation history of biomedical interventions and experience in GBV prevention and response, human rights programming, or related areas.
- Knowledge about and ability to communicate and network with relevant district stakeholders and structures such as government departments, local and district AIDS Councils. Evidence of a Memorandum of Understanding (MOU) or Service Level Agreement (SLA) with government departments.
- A sound system of management and financial controls including an accounting system that can correctly record all transactions and balances by source of funds. Ability to monitor spending in

comparison to budgets and work plans and to manage disbursement of funds to organisations and suppliers in a timely, transparent and accountable manner.

- Ability to produce timely and accurate financial reports.
- A track record of effective and efficient use of a digitised monitoring and evaluation system, tools and procedures. Experience of using Global Fund systems is advantageous.
- Sound human resources processes and policies that are implemented.
- Evidence of policies and procedures for the Prevention of Sexual Exploitation, Abuse and Harassment (PSEAH) and Child Protection Policies.

Further information can be found on the Global Fund website (www.theglobalfund.org), including the Global Fund Grants Regulations.

3. PROGRAMME DESCRIPTION

The My Journey Adolescent and Young People Programme, is a targeted initiative focused on addressing the unique challenges faced by young women in relation to HIV and AIDS, sexual and reproductive health, and overall wellbeing. The Programme offers a **defined package of services** through a highly-focused and performance-driven approach, reaching adolescent girls and young women with health services between 15 and 24 years old. The aim of the programme is to reduce the incidence of HIV among adolescent girls and young women in high- and moderate-incidence districts by increasing:

- HIV testing
- Consistent condom use
- PrEP products use
- Retention of HIV positive young women in care

Young women will be introduced to the programme and will receive services in a range of community locations including safe spaces, hot spots, places of learning, community spaces etc. Health services will be provided according to a young woman's needs, prioritising HIV testing, consistent condom use, prevention choices and continuity of care. These services will be offered across three integrated focus areas – My journey, My choice, My voice.

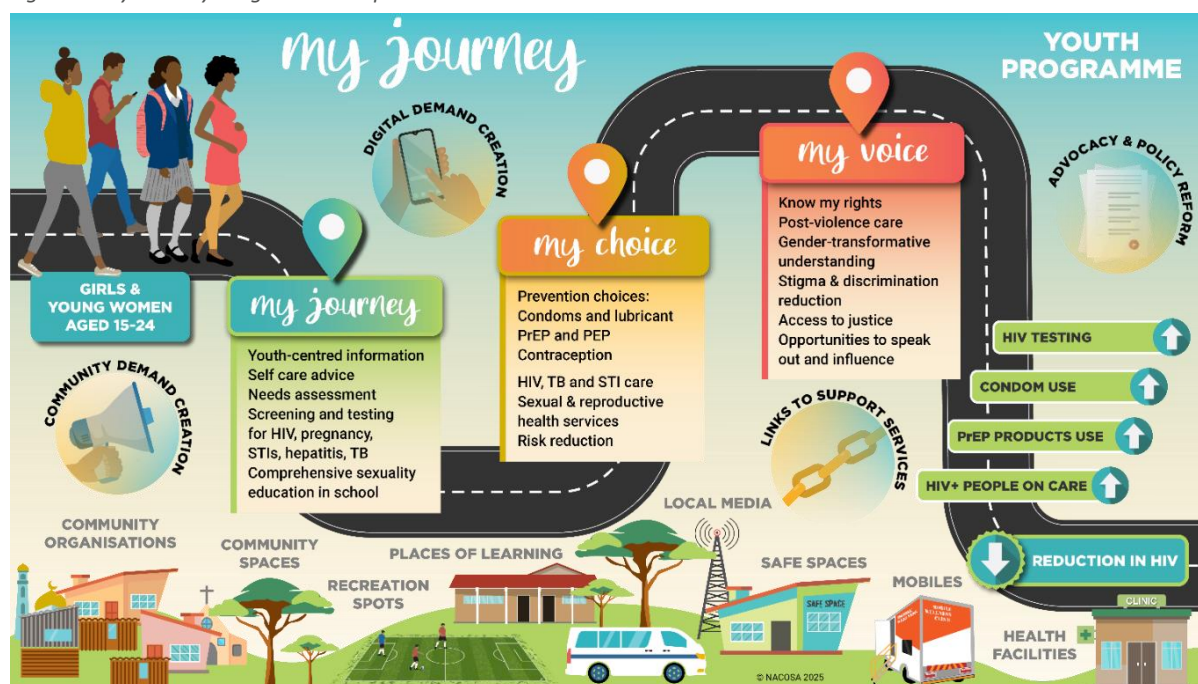
1. MY JOURNEY	2. MY CHOICE	3. MY VOICE
• Youth-centred information • Self-care advice • Risk assessment • Screening and testing for HIV, pregnancy, STIs, hepatitis and TB	• Prevention choice advice • Condoms and lubricants • PrEP and PEP • Contraception • HIV, TB and STI care • Sexual and reproductive health services • Risk reduction	• Know my rights • Post-violence care • Gender-transformative understanding • Stigma and discrimination reduction • Access to justice • Opportunities to speak and influence

Cross-cutting activities aimed at increasing uptake and access to services include:

- Community demand creation and mobilisation
- Digital demand creation and youth-friendly information
- Links to other available support services such Thuthuzela Care Centres and referrals to statutory child protection, key populations programmes, psycho-social services, economic strengthening initiatives, etc.
- Advocacy and policy reform to advance the rights of girls and women

Figure 2 provides an overview of the journey that a young person follows and of the different services available. Services will be delivered by the selected organisations in tailored and targeted settings.

Figure 2: My Journey Programme Graphic



The expected **defined package of services** to be offered by the selected organisations is listed below.

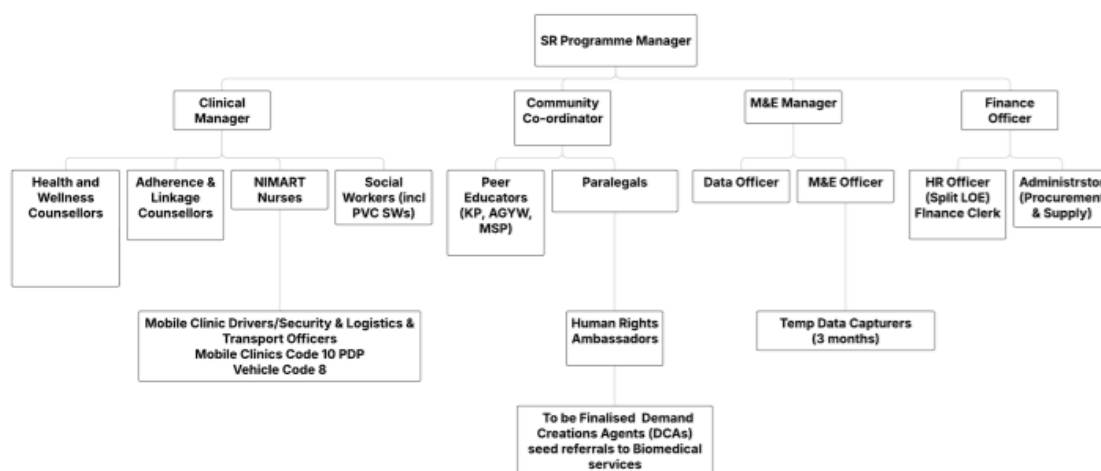
Table 1: Defined package of services

HEALTH SERVICES	HUMAN RIGHTS
A needs assessment (using the <i>the HIV risk reduction counselling approach</i>) to determine services needed	Legal literacy to educate young women on their rights to confidentiality, informed consent, protections against discrimination, violence and sexual exploitation
Conduct HIV testing services conversation with the intention to test on the same day, including assisted HIV self-screening	Recording of human rights violations and referral for access to justice
Provide condoms and lubricant at each contact session	Stigma and discrimination reduction sensitisations and community dialogues
Provide sexual and reproductive health education and information	Referral to social grant support, medico-legal post-violence care and GBV services
Provide PrEP choices for high-risk young women	Coordination of human rights advocacy and campaigns , alongside civil society
Health interventions as per needs assessment provided or offered via referral pathway including: - Antiretroviral treatment, case management and viral load monitoring - Identify pregnant young women living with HIV and prevent vertical transmission - TB and STI screening, diagnosis and treatment - Sexual and reproductive health services - Basic package of integrated post-violence care.¹ - HPV screening and referral.	Community engagement for rights awareness, gender transformative approaches, GBV prevention, and stigma reduction.

¹ Minor wound care, emergency contraception, pregnancy testing, post-exposure prophylaxis (PEP), and trauma containment.

STAFFING AND RESOURCES

Staffing and budget will be agreed and finalised once contract negotiation is completed, based on the sub-district targets and needs. The following organogram is provided as indicative of what the expected staffing levels may be.



NACOSA will provide continuous technical support and site visits to contracted organisations throughout the grant cycle. NACOSA will provide relevant programme related trainings based on assessed needs.

TARGETS

The programme is a performance-based grant which works within a detailed performance framework. The table below provides a draft set of targets towards programme indicators. Targets will be finalised during grant-making – these may therefore be subject to change.

Table 2. Indicators and targets (Preliminary) for the Overall Programme

INDICATOR NO	INDICATOR	OVERALL TARGET AT THE OUTER YEAR
YP-2	Percentage of high-risk adolescent girls and young women reached with HIV prevention programs - defined package of services	384 284 (80% coverage of the 15-24 PSE)
HTS-2	Percentage of high risk AGYW that have received an HIV test during the reporting period in AGYW programs	384 284 (80% coverage of the 15-24 PSE)
YP-4	Number of high-risk adolescent girls and young women who received any PrEP product at least once during the reporting period	51 361
HTS-5	Percentage of people newly diagnosed with HIV initiated on ART	95% of the new HIV positives

These targets can be further disaggregated into sub-district based targets as indicated in Table 3 below. In addition to the performance indicators, there are several management indicators that organisations will be expected to report on.

Table 3: District targets (preliminary)

PROVINCE	DISTRICT	SUB-DISTRICT	AGYW REACH
			82%
Eastern Cape	Buffalo City Metropolitan Municipality	Buffalo City Health sub-District	26216
Eastern Cape	Oliver Tambo District Municipality	Nyandeni Local Municipality	12876
Eastern Cape	Oliver Tambo District Municipality	Port St Johns Local Municipality	9320
Free State	Mangaung Metropolitan Municipality	Bloemfontein Health sub-District	12045
Gauteng	City of Johannesburg Metropolitan Municipality	Johannesburg D Health sub-District	47839
Gauteng	City of Johannesburg Metropolitan Municipality	Johannesburg F Health sub-District	31863
Gauteng	City of Johannesburg Metropolitan Municipality	Johannesburg G Health sub-District	31353
KwaZulu-Natal	King Cetshwayo District Municipality	City of uMhlatuze Local Municipality	17334
KwaZulu-Natal	Umkhanyakude District Municipality	Jozini Local Municipality	6540
KwaZulu-Natal	Umkhanyakude District Municipality	Mtubatuba Local Municipality	6350
Limpopo	Capricorn District Municipality	Polokwane Local Municipality	24213
Mpumalanga	Ehlanzeni District Municipality	Bushbuckridge Local Municipality	20016
Mpumalanga	Ehlanzeni District Municipality	City of Mbombela Local Municipality	29228
Mpumalanga	Ehlanzeni District Municipality	Nkomazi Local Municipality	20568
Mpumalanga	Gert Sibande District Municipality	Govan Mbeki Local Municipality	12509
Mpumalanga	Gert Sibande District Municipality	Mkhondo Local Municipality	8916
North West	Bojanala Platinum District Municipality	Rustenburg Local Municipality	28545
Western Cape	City of Cape Town Metropolitan Municipality	Eastern Health sub-District	16731
Western Cape	City of Cape Town Metropolitan Municipality	Western Health sub-District	12801
8	11	19	384645

4. APPLICATION REQUIREMENTS

Applicants may choose to apply for one (1) or more geographic areas on condition that the applicant is based in the district or is currently implementing similar programmes in the district. This should be clearly specified in the applicant's proposal.

The successful applicants should have:

- Legal status recognised to work in South Africa, enabling the organisation to perform the above-mentioned tasks.
- Demonstrated ability and experience of being an efficient and effective implementer of the scope of work required including the knowledge and ability to provide or facilitate:
 - Biomedical services listed above to young people
 - Post-violence care services (PEP initiation, emergency contraception, STI treatment, trauma containment) OR strong referral systems to such services (examples: local clinics, Thuthuzela Care Centres, South African Police services and justice stakeholders)
 - Legal and human rights support, including referrals to justice systems.
 - Demand creation and health information provision – through traditional and digital channels.
 - Community engagement for rights awareness, GBV prevention, and stigma reduction.
 - Ability to work with key populations and vulnerable groups (adolescents, sex workers, LGBTQ+ people, people who use drugs).
 - Existing referral networks (health, legal aid, police, shelters).
 - Survivor-centred approach, confidentiality and *Do No Harm* principles with the ability to track and report on service uptake and human rights.
- Excellent administration and project management ability.

Only submissions that meet the technical specifications in all aspects as stipulated in request for applications will be considered.

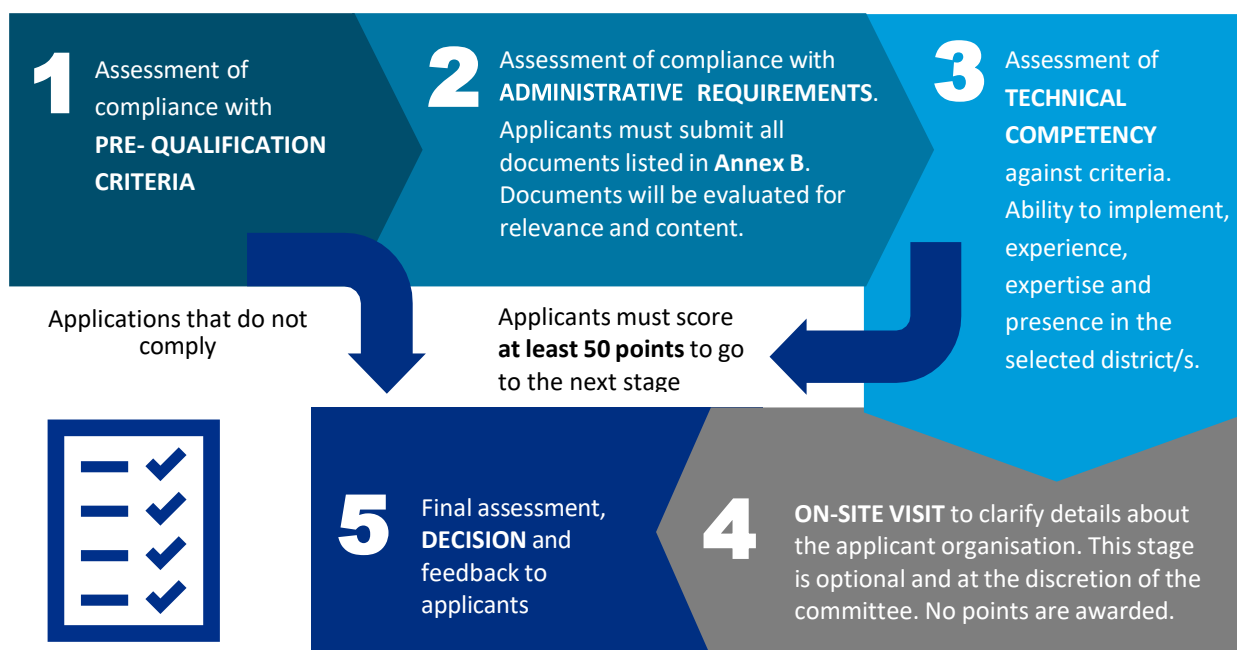
5. EVALUATION PROCESS

Applications shall be evaluated in the following order:

- Screening for compliance with pre-qualification criteria. Applicants that do not meet the pre-qualification criteria shall be disqualified.
- Screening for administrative requirements (if any) as per the requirements in the RFA. Disqualified submissions shall not undergo technical evaluation.
- Evaluation of technical proposals. PRs should specify the minimum technical evaluation score, not lower than 50%, to be attained for applications to proceed further.
- All shortlisted applicants shall undergo reference checks to verify that they have no documented history of financial mismanagement, misconduct, or non-compliance.

The process is summarised in Figure 3 on the following page.

Figure 3: Evaluation Process Summary



6. EVALUATION CRITERIA

The following criteria will be used to assess the submissions received before the closing date and time. Each stage of the evaluation process has specific requirements that must be met before proceeding to the next stage of the evaluation process. Below are the requirements for each stage:

STAGE 1 PRE-QUALIFICATION

B-BBEE Compliance

Applicants must have a broad-based black economic empowerment (B-BBEE) level one (1) or two (2) only. A valid B-BBEE certificate or sworn affidavit is required and applicants that do not meet this requirement will be disqualified from further evaluation.

Preference

Applicants must note that preference will be given to organisations that have women and youth representation in their board and management structures. In the event where two (2) or more applicants score the same points on the technical evaluation criteria then preference will be given to organisations that have women and youth representation.

The detailed technical evaluation criteria that applicants will be scored on is indicated in the table on the following page. Applicants must obtain a minimum of 50 points out of 100 to be shortlisted.

STAGE 2 ADMINISTRATIVE COMPLIANCE

Applicants must complete and submit all documents listed in Annex B. A template application form has been provided. If an applicant does not submit all the required mandatory documents, your organisation will be disqualified from further evaluation.

STAGE 3 TECHNICAL COMPETENCE

If your organisation satisfies the pre-qualification and administrative requirements, your application will be assessed for technical competency against the criteria set out below. The weighting of the overall score is as follows:

Technical evaluation score	80%
BBBEE points	20%
Total	100%

EVALUATION CRITERIA AND SCORING

CATEGORY	CRITERIA	SCORING						POINTS
ORGANISATION CAPACITY	Funding Experience of being donor-funded by either international or local donors in the past 5 years.	0	1	2	3	4	5	5
	No experience of any donor funding	1 donor in past 5 years	2 donors in past 5 years	3 donors in past 5 years	4 donors in past 5 years	5 or more donors in the past 5 years		
	Managing donor funds Proven experience of successfully managing international or local donor funds as evidenced by past or current performance reports	0	1	2	3	4	5	5
		<30% performance target reached	30%-59% performance target reached	60% -79% performance target reached	80%-89% performance target reached	90%-99% performance target reached	>=100% performance target reached	
	Financial management Evidence of relevant registrations, systems, processes, policies and qualified team to manage a large grant	0	5	10	15			15
	No evidence provided	Manual system, basic processes and policies with limited capacity	Sufficient systems, processes and policies with qualified finance team	Extensive & matured systems, processes and policies, highly qualified team with relevant registrations				
PROGRAMME EXPERIENCE	HIV prevention & peer education Experience in delivering HIV prevention and peer-led education activities focusing on adolescent girls and young women.	0	1	2	3	4	5	5
	Never implemented prevention activities	Prevention & education activities reaching less than 2500 participants per year	Prevention & education activities reaching 2500-4,999 participants per year	Prevention & education activities reaching 5,000 – 9,999 participants per year	Prevention & education activities reaching 10 000 -19 999 participants per year	Prevention activities reaching over 20,000 participants per year		
	HIV testing services Experience in directly delivering HIV Testing Services (HTS) for adolescent girls and young women.	0	1	2	3	4	5	5
	Never directly implemented	Direct services to less than 2500- participants per year	Direct services to 2500-4,999 participants per year	Direct services to 5,000-9,999 participants per year	Direct services to 10,000-19,999 participants per year	Direct services to over 20,000 participants per year		
	Clinical SRH services Experience in directly delivering clinical sexual and reproductive health services (SRH) for young women.	0	1	2	3	4	5	5
	Never directly implemented clinical SRH services	Direct services to less than 2500- participants per year	Direct services to 2500-4,999 participants per year	Direct services to 5,000-9,999 participants per year	Direct services to 10,000-19,999 participants per year	Direct services to over 20,000 participants per year		
	Delivery of PrEP and PEP Experience in the delivery of clinical Pre-Exposure Prophylaxis (PrEP) and Post-exposure Prophylaxis (PEP) services to young women.	0	1	2	3	4	5	5
	Never directly implemented	Direct services to less than 500- participants per year	Direct services to 500-999 participants per year	Direct services to 1,000-2,500 participants per year	Direct services to 2,501-5,000 participants per year	Direct services to over 5,000 participants per year		

CATEGORY	CRITERIA	SCORING						POINTS
PROGRAMME EXPERIENCE	Commodities Experience in management and distribution of medical and non-medical commodities including condoms, dignity packs etc. Procurement & supply chain management (PSM) experience. Preference for experience with Department of Health (DoH) procurement. (as evidence relevant policy or SOP),	0	1	2	3	4	5	5
		No experience demonstrated	PSM policy but no experience in management & distribution	No PSM Policy but Experience in managing stock card system & distribution	PSM policy and experience in management & distribution	PSM policy and experience in management & distribution, procuring from local suppliers	PSM policy and experience in management & distribution, procuring from DoH.	
	Digital M&E Systems Experience in using and managing digital monitoring and evaluation systems.	0	1	2	3	4	5	5
		No experience	Some experience but not in past 12 months	Emerging current capacity in basic systems	Current capacity in a recognised digital monitoring system	More than 3 years’ experience using a range of systems	Extensive experience in development, management and use	
	Behaviour change communications Experience in social behaviour change communication (SBCC) , demand creation and managing digital health communication for and with young people, with some existing online presence (website, social media channels, number of followers).	0	1	2	3	4	5	5
		No capacity or online presence	Limited online presence but have never implemented SBCC	Basic SBCC experience with limited online presence	SBCC experience with online following/reach under 5000	Experience of youth-centred SBCC and online following/reach under 10,000	Extensive experience of youth-centred SBCC and online presence over 10,000	
	Partnership with government Partnership with government (as evidenced by MOU or SLA), particularly the Department of Health for procurement and management of clinical commodities.	0	1	2	3	4	5	5
		No experience in the past 3 years	Prior MOU or SLA for the past year	Prior MOU or SLA for the past two years	Current MOU or SLA but excludes clinical commodities	Current MOU or SLA including clinical commodities	Current and history of MOU or SLA including clinical commodities	
	Human rights and GBV services Experience in gender-based violence (GBV) prevention and response, human rights programming and/or related areas	0	1	2	3	4	5	5
		No experience	Experience but not in past 12 months	Experience in the past year reaching less than 5,000	Experience in the past year reaching 5,000-10,000 people	Experience in the past year reaching over 10,000 people	Extensive, integrated experience, leader in the field	
COMMUNITY PRESENCE	Experience of working in the district/s Letter confirming participation in the district coordination structure (District AIDS Council or if not, from Provincial Council on AIDS)	0	3	5	7	10	10	
		Less than 1 year or no experience or evidence	1-3 years’ experience with evidence	3-5 years’ experience with evidence provided	5-7 years’ experience with evidence provided	> 7 years’ experience with evidence provided		
B-BBEE COMPLIANCE	Minimum B-BBEE levels 1 or 2	Level two (2): 18			Level 1 (one): 20			20
TOTAL POINTS								100

7. TIMEFRAMES

Please be advised the dates below are indicative and subject to change.

ACTION	RESPONSIBLE	DATE
Non-compulsory Briefing Session	NACOSA	26 August 2025 at 10:00am
Deadline for Submission of questions and answers	Applicants	1 September 2025 at 16:00pm
Deadline for Responses	NACOSA	3 September 2025
Closing Date for Bid submissions	Applicant	5 September 2025 at 13:00pm
Evaluation completion: additional details may be requested and an on-site visit may be done	NACOSA	15 September 2025
Feedback to applicants	NACOSA	26 September 2025

8. SUBMISSION REQUIREMENTS

APPLICATIONS MAY BE SUBMITTED EITHER ELECTRONICALLY OR PHYSICALLY FOLLOWING THE INSTRUCTIONS BELOW. NO LATE APPLICATIONS WILL BE CONSIDERED.

FOR ELECTRONIC APPLICATIONS

Please follow the steps below to submit your electronic application.

STEP 1

Upload the cover letter, application form and all 16 annex documents to **We Transfer** (<https://wettransfer.com>). The documents should be clearly marked in the following order:

1. Cover letter (signed by Head of Organisation)
2. Completed Application Form (signed by Head of Organisation)
3. Supporting documents in the **number order** specified in the Application Form.

Before submitting please note:

- Make sure your application is complete (including the attachment of all necessary supporting documents/Annexes).
- Do not exceed the recommended length of each section of the form.
- The documents in your We Transfer file will be moved to a central repository and any documents added to your We Transfer file at a later stage will not be seen by NACOSA.

STEP 2

Submit the application by e-mail to RFASubmissions@nacosa.org.za with **RFA-NACOSA-01-2025** in the subject line. Provide the **We Transfer link** in your email and *test that it is working*. When we receive your email, we will check the We Transfer link and confirm that all annex documents have been received.

For all applications, please make sure:

- You submit all documents and reports on time if requested as part of the assessment of the organisation's ability to fulfil the role of an SR.
- That appropriate staff are available if or when the on-site SR capacity assessment visit is done.

FOR HAND DELIVERED APPLICATIONS

This is only applicable to applications being submitted physically and not those submitted electronically.

The proposals should be in sealed envelopes with the reference number: RFA-NACOSA-01-2025 and should be addressed to:

Supply Chain Department: NACOSA
3rd Floor, East Office Tower
Canal Walk
Century Boulevard Century City
7441
Cape Town

The application must be signed by the official head of the organisation as the authorised signatory.

Applicants must complete the Application RFA Submissions Register and thereafter deposit one (1) copy of the application with all supporting documentation into the tender box at either one of the following locations:

PROVINCE	ADDRESS
Western Cape	NACOSA 3rd Floor, East Office Tower, Canal Walk, Century Boulevard Century City, Cape Town, 7441
Gauteng	NACOSA Block A, Unit 3, First Floor, NACOSA, Inkwazi Office Park, 1249 Embankment Rd, Zwartkop, Centurion, 0051
North West	NACOSA Regus Business Centre, 214 Beyers Naude, Rustenburg 0030
Limpopo	Office of the Premier No 44 Biccard Street, Polokwane, Limpopo
Mpumalanga	Office of the Premier Building No 2 (Reception), No. 7 Government Boulevard, Riverside Park, Extension 2, Mbombela,
Kwa-Zulu Natal	District AIDS Council 214 Dr Pixley kaSeme street, Durban 4001, Liberty Towers, Ground floor
Eastern Cape	BCMM Office Corner 79 Fitzpatrick and merino street, Quigney, East London (1st Floor near security desk)
Free State	Free State PCA OR Tambo House Building, Cr Shalotte Maqheke & Margraff, Office 605, 6th Floor

9. QUESTIONS

Questions about this call for proposals may be submitted by email. Please direct your requests for information and questions/queries in writing (only) to RFAQueries@nacosa.org.za. All emailed questions must contain the subject line **“RFA-NACOSA-01-2025 Programme Query.”**

The questions will be anonymised and published with answers on NACOSA’s website.

APPEALS

Feedback will be provided to applicants upon completion of the selection process. Unsuccessful applicants may lodge and appeal within five (5) days of receiving a response providing reasons, addressed to the Executive Director of NACOSA. The letter must be formally written on the organisation’s letterhead and signed by a representative with signing authority. The appeal must be submitted by e-mail to RFAQueries@nacosa.org.za with the subject line containing: **“RFA-NACOSA-01-2025 -Appeal.”**

To ensure fairness, no personal or direct communication with NACOSA staff about the proposal will be entertained.

TERMS AND CONDITIONS

Invitation not an offer

This RFA serves an invitation to facilitate a requirement-based decision and not an offer to do business with NACOSA.

Language

The submission prepared by the applicant including correspondences and documents relating to this bid shall be written in the English language.

Preparation Costs

The applicant shall responsible for all its costs incurred in preparing, submitting and presenting any response to this RFA and all other costs incurred by it throughout the process.

Due Diligence

NACOSA reserves the right to conduct due diligence on the prospective applicants prior to final award of the contract. A sub-recipient capacity assessment may be conducted as part of the process, this may include site visits or requests for additional information.

Awarding of Contract

NACOSA will award the contract to the successful applicants' subject to proven relevant experience providing the required services including the ability to deliver effective and reliable services. The successful applicants shall not be insolvent, in dissolution, bankrupt or in the process of being wound up and is not the subject of legal proceedings relating to such matters.

Discretion

NACOSA reserves the right to accept or reject any applications and to cancel the RFA at any time, whether before or after the closing date of this bid without attracting any liability.

Information Validity

NACOSA has made reasonable efforts to ensure accuracy in compiling the terms of reference for this project. The applicant is deemed to have examined the terms of reference and any other information supplied by NACOSA to the applicant and have satisfied itself as to the correctness and sufficiency of such before submitting its application. Also, neither NACOSA nor its employees or agents will be held liable to the applicant or any third party for any inaccuracy or omission in this RFA.

Joint Ventures, Consortiums and Trusts

Applicants must provide solid proof of the existence of the joint ventures and /or consortium arrangements. The joint venture and /or consortium agreements must clearly set out the roles and responsibilities of the Lead Partner and who shall be given the power of attorney to bind the other party/ parties in respect of matters pertaining to the joint venture and/or consortium arrangement.