PRICE Quotation Form

|  |  |
| --- | --- |
| **Full name of Individual:** |  |
| **Date of the quotation:** | Click here to enter a date. |
| **Vacancy notice** | Assessment of current school health services in Mongolia. |
| **Currency of quotation:** | MNT |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Item | Description | Quantity | Unit of Measure | Unit Rate | Total |
| 1 | Consultancy fee |  | Daily rate |  |  |
|  |  |  |  |  |  |
| TOTAL AMOUNT: |  |

I hereby certify that I have reviewed the UNFPA General terms and Condition for Individual Consultant Contract and Terms of Reference of the assignment including all annexes, amendments (if applicable) and the responses provided by UNFPA on clarification questions from the prospective consultants.

|  |  |  |
| --- | --- | --- |
|  | Click here to enter a date. |  |
| Name and title | Date and place |