Financial Offer: Entrepreneurship Trainer

Full Name: **Date:**
Address:
Country:
Phone:
Email:

Project Name	IRC
Period of assignement	Till May 2026
Currency	USD

Description	**Unit (up to)**	**Type of Unit**	**Price per unit cost in USD**	**Total price in USD**
Entrepreneurship Trainer: Coordinating training activities, assess participants' needs, and provide tailored support to help PWDs develop viable business canvas.	20	Days		
			Total	
			VAT 11%	
			Total	

Acknowledgments	**Response (yes/no)**
Acknowledgement that you are ready to achieve the deliverables by end of project	
Acknowledgement that you accept Bank Letter Payment Modality	
Validity offer by end of the project	