

**Call for Proposals 4: Nimble Evaluations**

Please note that this form is for preparation purposes only. Applications must be submitted via the [online form](https://www.surveymonkey.com/r/nimblecallapplication).

Please be mindful of each question’s character limit, as the online form will restrict the length of your answer.

|  |  |  |
| --- | --- | --- |
| 1 | Contact details. |  |
|  | Name |  |
|  | Affiliation |  |
|  | Email address |  |
|  | Phone number |  |
| 2 | Is the proposed evaluation designed for a specific World Bank or DFID project included in the call-for-proposals? If yes, please list ID number of project from call-for-proposals document. |  |
| 3 | Country location of project being evaluated. |  |
| 4 | Sector [Select all that apply: Early childhood development and nutrition; Basic education; Health systems; Water and sanitation] |  |
| 5 | Please succinctly describe the policy problem in need of evidence from a nimble evaluation? [maximum 1500 characters] |  |
| 6 | Please succinctly describe the intervention(s) to be evaluated [maximum 2000 characters] and include anything known on implementer(s). If you are proposing an intervention to evaluate for a World Bank or DFID policy problem included in the call for proposals, please describe the intervention and your suggestions for implementation and a timeline. |  |
| 7 | Is the intervention to be evaluated currently part of a World Bank operation? [Option: Not yet; Yes. Please list World Bank p-code] |  |
| 8 | Is the intervention to be evaluated currently part of a DFID operation? [Options: Not yet; Yes - Yes. Please list DFID project code] |  |
| 9 | Do you know when the intervention is scheduled to start? [Options: Not yet; Yes. Please list Month and Year [date format] |  |
| 10 | Do you know when the intervention would end? [Options: Not yet; Yes. Please list Month and Year [date format] |  |
| 11 | Duration. |  |
|  | 1. What would be the total duration in months of the proposed intervention to be evaluated? |  |
|  | 1. How long (in months) after intervention start would you want to measure impact? |  |
| 12 | Please list the primary research question(s) this evaluation is meant to answer. Please be specific. [maximum 1000 characters] |  |
| 13 | Is there a decision-maker waiting for this research question to be answered? If yes, please answer questions below. If a decision-maker has not yet been engaged, please proceed to next question. |  |
|  | a. Please list name and affiliation. |  |
|  | b. Please succinctly describe what decision(s) will be affected. [maximum 1000 characters] |  |
|  | c. What is the latest date this decision-maker would need this information? |  |
| 14 | Please succinctly describe the extent to which answers to the primary research questions can contribute to global knowledge. [maximum 1000 characters] |  |
| 15 | Evaluation method(s). [Select all that apply: Randomized Control Trial; Cluster Randomized Control Trail; Differences in Differences; Regression Discontinuity Design; Instrumental Variables; Propensity Score Matching; Other Matching |  |
| 16 | Unit of randomization, if applicable. |  |
| 17 | Treatment groups. Please describe the evaluation's treatment groups and include information on what interventions each will receive. [maximum 500 characters per treatment group] |  |
|  | Treatment group 1 |  |
|  | Treatment group 2 |  |
|  | Treatment group 3 |  |
|  | Treatment group 4 |  |
| 18 | Comparison group. Please describe the evaluation's comparison group and include information on what intervention(s) it will receive, if any. [maximum 500 characters] |  |
| 19 | Primary outcomes(s). Please list the primary outcomes that would be measured to detect impact. |  |
|  | Primary outcome 1 |  |
|  | Primary outcome 2 |  |
|  | Primary outcome 3 |  |
|  | Primary outcome 4 |  |
| 20 | Unit(s) of observation. Please specify your main units of observation and specify the target sample size for each unit of observation. |  |
|  | Unit of observation 1 and sample size |  |
|  | Unit of observation 2 and sample size |  |
|  | Unit of observation 3 and sample size |  |
|  | Unit of observation 4 and sample size |  |
| 21 | Please categorize the data sources that you propose using to measure the primary outcomes. Check all that apply. [Options: Administrative records; Biometric data (including anthropometrics); Blood, urine, saliva or stool samples; Classroom or clinic observations; Cell phone data Survey(s); Monitoring and evaluation data; Satellite data; Water samples; Other (please specify)] |  |
| 22 | Please describe the specific data sources that would be used to measure the primary evaluation outcomes and include information you might currently have on their scope, frequency of reporting, and quality. If you do not have this information, please describe the scope, frequency, and method of data collection you would propose [maximum 2000 characters] |  |
| 23 | Will the proposed data collection required for this evaluation help improve existing sources of data within the country? [Options: No, Yes - if yes, please describe how [maximum 1000 characters] |  |
| 24 | Please succinctly describe how the evaluation design will uncover a causal relationship between the main intervention(s) and primary outcome(s) described above. [maximum 2000 characters] |  |
| 25 | Please succinctly describe your strategy for estimating the costs of the intervention(s) under evaluation, including the frequency and sources of cost data collection. [maximum 1500 characters] |  |
| 26 | Please succinctly describe your strategy for inferring implementation fidelity of the intervention(s) under evaluation, including the frequency and sources of any data collected. [maximum 1500 characters] |  |
| 27 | Total estimated costs of proposed evaluation design (USD) |  |
| 28 | Total estimated evaluation funding requested from SIEF (USD) |  |
| 29 | Is funding for the intervention under evaluation already secured? [Options: Yes, Not yet - if not yet, please describe steps planned to secure funding. [maximum 500 characters] |  |
| 30 | Principal investigator contact details |  |
|  | Name |  |
|  | Affiliation |  |
|  | Email address |  |
|  | Phone number |  |
| 31 | Principal investigator CV [pdf or .docx for uploading] |  |
| 32 | Other key evaluation team members or partner organizations. |  |
| 33 | Is there a particular World Bank task team leader (TTL) that you would like to work with? [Options: No, Yes - if yes, please list name and email address. Please list yourself if you are both principal investigator and plan to be the World Bank TTL for the operation] |  |
| 34 | If you were to give your study a title, what would it be? [maximum 140 characters] |  |