



With funding from



Terms of Reference

**For Final Evaluation of the Regional Project:
“Future for You(th): Young people as Leaders of Life Skills Education in the Balkans”
1st March 2021 – 28th February 2024
Contract no: 8305-00/2021**

**Individual experts, companies or evaluators teams can apply
Deadline for application: 27th October 2024, at 4 PM CET**

Offers should be submitted the following e-mail address:
shalkic@care.ba

1. Project Background

CARE's work in the Balkans started in 1992, when it provided humanitarian support to people affected by war. In the late 90ies, CARE shifted its focus in the region from humanitarian post-war assistance and rehabilitation to socio-economic development engaging in interventions directed at conflict prevention and peacebuilding, sustainable livelihoods, gender equality and the prevention of gender-based violence.

CARE is announcing a call for applications for a final evaluation for the project "**Future for You(th): Young people as Leaders of Life Skills Education in the Balkans**" or Future for Youth which builds upon CARE's comprehensive and programmatic effort to fight interpersonal and gender-based violence (GBV) as well as to improve gender equality in the region and address preventative issues related to youth extremism and violence.

The Young Men Initiative (YMI) project started in 2006 with qualitative research on violence and anti-social behaviors in young men, and over the years has grown into a comprehensive program targeting a wide variety of stakeholders: young people, parents, teachers, educational workers, university students, journalists, etc. In 2013, through the Austrian Development Agency (ADA)-funded project Young Men Initiative (YMI), CARE and partners started to advocate for introducing gender transformative life skills programming – such as Program Youth (from here on out Program Y) - in high schools in Serbia, Kosovo, Albania and Bosnia and Herzegovina, to fight interpersonal and gender-based violence and improve gender equality in the region.

The project has grown and transformed into the **Future for Youth project** (2021-2024), which is the subject of this evaluation. It is funded by the Austrian Development Agency and has a budget of EUR 1,384,845.00. The project started on 1st March 2021, and it will last until 29th February 2024. It is implemented by CARE in cooperation with seven local partner organizations: Center E8 (CE8) and SMART Kolektiv from Serbia, Center for Counseling, Social Services and Research (SIT) and YMCA from Kosovo, Act for Society Centre (AsF) from Albania, Institute Perpetuum Mobile (PM) from Bosnia and Herzegovina and Status M from Croatia.

Project Objectives

The expected project's impact is to contribute to creating positive and peaceful societies for young people in Serbia, Kosovo, Albania and Bosnia and Herzegovina that embrace and promote gender equality and non-violence.

The project's **outcome** is to foster gender-transformative life skills education to become an integral part of education programs at schools and juvenile correctional institutions. In order to accomplish this, the project targets the following **specific outputs**:

Output 1 - Elementary schools, high schools and universities are equipped to effectively deliver and lead the implementation of CARE's life skills program (Program Y) to support young people in their safe transition to adulthood.

Output 2 - Juvenile correctional institutions pilot CARE's life skills program tailor-made for youth at risk (Program Y Plus) to prevent radicalization and contribute to re-socialization.

Output 3 - Communities are mobilized and take an active role in initiating the educational policy change, securing stronger public voices for youth within Future 4 You(th) Movement.

Output 4 - Governmental bodies empowered to develop strategies to institutionalize life skills programming through multi-stakeholder consultation processes.



The Future for Youth project document foresees that the project will work directly with 65,690 participants: at least 200 representatives of decision-making government institutions; 500 high and elementary school teachers and education staff; 160 social welfare staff; 47,800 young people from 11 to 30 years old in elementary schools, high schools, universities, as well as youth in communities; at least 17,000 local stakeholders in mobilized communities and at least 30 representatives of seven local partner organizations.

The project has already conducted a school baseline assessment in period September – November 2021, and will conduct a school end line assessment in September 2023 targeting Output 1. Baseline and End line Assessments are addressed to measure changes in attitudes, knowledge, and behavior of main beneficiaries - high school boys and girls from targeted schools where full programme intervention has been implemented within Serbia, Bosnia and Herzegovina, Albania, and Kosovo*, related to gender-based violence, gender equity and healthy lifestyles. These assessments are expected to be taken into consideration in this final evaluation of the project. The project outcome and outputs, as well as project indicators can be found in the project document and the project's logical framework. Additionally, all relevant information regarding the YMI can be found on the youngmeninitiative.net and program-y.org websites, as well as [its resources page](#).

2. Purpose and Objectives of the Final Evaluation

The **main purpose of this final evaluation** are accountability and learning for possible future interventions in this area.

The **main objectives of this evaluation** are:

- a) To assess the project's relevance, impact and sustainability, drawing on qualitative and quantitative project data and evidence;
- b) To assess the extent to which the project has achieved its objectives and results (focusing on outcome);
- c) To assess the extent to which cross-cutting issues such gender equality and nondiscrimination, participation and inclusion, transparency and accountability and empowerment of marginalized groups were applied and contributed to results achievement.

The results of the final evaluation will serve to inform CARE, the donor and the involved stakeholders about the findings and recommendations drawn from the implementation of the YMI project and to enable **learning, improved design, planning and implementation** of future CARE projects in gender transformative programming.

Primary users of the evaluation: project stakeholders, in particular CARE Austria, CARE International in the Balkans and local partners, ADA, and other co-donors.

Secondary users: policymakers and program designers and implementers of other organizations that engage in gender equality, violence prevention and educational reform.

3. Subject and focus (scope)

The evaluation shall address the full period of project implementation, from project start to the end of data collection during the implementation of this evaluation. Its scope will cover all four target countries¹ (Bosnia and Herzegovina/B&H, Serbia, Kosovo* and Albania) and main project beneficiaries (partner organizations, institutional representatives, teachers, youth, movement leaders).

Evaluator(s) must cover particular OECD-DAC evaluation criteria and provide findings, conclusions and recommendations. Priority will be given to **relevance, effectiveness and (immediate) impact, and sustainability** of the intervention in order to get recommendations and findings. . The rest of the criteria are not expected to be prioritized considering the given time frame, budget, and purpose of the evaluation.

The last phase of the project implementation, in the period from **November 2023 - March 2024** (the detailed evaluation schedule is described in the Timetable section below).

4. Evaluation questions ²

1) Relevance

1. To what extent has the project responded to the needs of the local communities and the relevant sectoral policies of the target countries and proven to be feasible?
2. Are there any gaps or limitations in the project's design or implementation that affect its relevance?

2) Effectiveness and (immediate) Impact

3. To what extent have stakeholders (school staff, parents, representatives of institutions...) /beneficiaries (youth) as defined gained new knowledge and changed their behavior?
4. What are the potential positive or negative outcomes that were not intended because of the intervention?
5. To which extent campaigns and/or programs implemented by the project have increased awareness of key target groups about promoting peaceful masculinities, gender equality and addressing hate speech and intolerance?
6. Have there been any positive changes or beneficial effects observed in policies and strategies that incorporate life skills topics, as a result of the project? What were the identified best practices for collaborating with working groups to support the integration of life skills programming into institutional structures? How did the project activities mobilize communities to have an impact on influencing educational policies?

¹ Focus should be on Belgrade, Banja Luka, Pristina, and Tirana.

² Wherever feasible, building upon the quantitative endline assessment and other evidence.



3) Sustainability

7. To what extent have the 7 project partners improved their organizational capacities for self-sustainable functioning as well as lobbying and advocacy?
8. To what extent are the key actors (partners and other stakeholders) prepared to take over the responsibility and carry on with the implementation of the developed strategies and commitments (ownership and leadership) considering institutional level (beyond project duration)?

5. Evaluation approach and methods

The Evaluator(s) shall use the following methods:

1. **Desk review** of available project documentation: Project proposal set (narrative, logical frame and supporting docs), Baseline and Endline Assessment Report, analysis and strategies developed during project implementation, selected Most Significant Change stories, YMI project websites with documentation and reports (www.youngmeninitiative.net, www.program-y.org, www.pazisex.net and YMI Facebook, Instagram and YouTube pages), CARE's Annual Narrative Reports, partners' grants progress reports and monitoring tables, ADA (Austrian Development Agency) Country Strategy, CARE Gender Policy Guidelines.
2. **Focus group** discussions with partner organizations management teams (min. 1), with implementing teams in each country (min. 4), and with beneficiary groups in each country, including youth from secondary schools, teachers, university students and movement leaders (min. 4).
3. **Individual or group interviews** with representatives of public bodies (ministries of education, social welfare and youth, universities, centres for social work), schools' staff (pedagogues and teachers), young men and women, university students, parents, community members, etc. based on inception report and agreed plan (minimum 2 per country, 8 in total).
4. **Direct observations**, including during project implementation events or visits to project locations, as possible.

The data collected through desk reviews, interviews, and focus group discussions should undergo a thorough analysis process to extract valuable insights and conclusions. The process of triangulation should be used to enhance the validity of the results by cross-referencing and comparing findings from various sources.

Data collection will include field research in following localities, as main localities of project implementation: Belgrade (Serbia), Banja luka (Republic of Srpska – Bosnia and Herzegovina), Priština (Kosovo*) and Tirana (Albania). If feasible, **participatory observations** in the target localities (school workshops, Be a Man Club activities, university students' workshops, street campaign performances, etc.)

All data collected need to be disaggregated by sex, age, and other relevant diversity in line with the project's logical framework. If consisting of more than of one person, the evaluation team should be gender balanced to ensure that respondents feel fully at ease to disclose any sensitive information during data collection processes.



The proposed methodology should reflect ADA's basic principles, commitment to cross-cutting issues and the human rights-based approach, as well as other approaches as relevant.

All data which will be collected during the final evaluation belongs to CARE and should not be subject to public distribution without prior approval by CARE.

The Guidelines for Project and Programme Evaluations developed by the Austrian Development Agency (see Annex 1 of this ToR) need to be applied throughout the entire evaluation process, in particular the quality checklists for the inception report and the evaluation report, including the ADA Results Assessment Form (RAF).

Indicative workload:	
Kick-off meeting between evaluator and Project Team	1 day
Desk Research	10 days
Inception Report	7 days
Incorporation of feedback to draft IR and finalization of IR	3 days
Field Research – visiting partners/countries and if necessary, follow up online interviews	A minimum of 15 days (3-5 days per country) including focus groups, in depth interviews, and individual and group consultations with all relevant individuals and groups, including key staff from partner organizations and with CARE staff
Data Analysis and drafting evaluation report, including RAF	15 days
Incorporating Comments and Final evaluation report submission	3 days
Presentation of the report	1 day
TOTAL	Approx. 60 working days

Timetable

Timetable	Output	Comments
13 th -27 th October 2023	Call for proposals	CARE will announce the open call for Final Evaluator(s).
1 st -5 th November 2023 (1 day)	Kick-off and clarification meeting	Kick-off and clarification meeting between the project team and the Evaluator(s).
6 th October – 26 th November 2023 (up to 17 days)	Desk research and Inception Report	The Evaluator(s) will draft the Inception Report based on initial desk research. The Inception Report will be presented through online call and sent by e-mail to CARE and ADA.

26 th November – 3 th December 2023 (up to 7 days)	Review and approval of Inception Report	ADA and CARE will review and approve the inception report. Only once CARE and ADA have approved the draft Inception Report, can data collection in the field start.
3 th December 2023 – 14 th January 2024 (3-5 days per country)	Field research - visiting partners/ countries and if necessary, follow up skype interviews	Field Research will be conducted during the ongoing CARE partners’ national and regional activities, as agreed with CARE and stakeholders (participatory observation and main target population interviewing – individually, in-depth, and/or focus group interviews). Field research will be conducted in four countries and at least in 1 locality per country (if possible), where actions related to the expected results have been implemented. Furthermore, the field visit also seeks to assess the performance and efficacy of key personnel from partner organizations and CARE staff who are actively engaged in executing national and regional initiatives. This part of the evaluation will involve a combination of methods, including participatory observation and individual interviews. The goal is to gain insights into the strengths, challenges, and areas for improvement of key personnel involved in the project.
15 th January– 5 th February 2024 (up to 15 days)	Draft Final Evaluation Report	The Evaluator(s) will deliver the draft Report including Evaluation Summary Report to CARE.
5 th – 15 th February 2024	Review and approval of Final Evaluation Report	ADA and CARE will review and approve the evaluation report.
By 20 th February 2024 (up to 3 days)	Incorporating Comments and Final evaluation report writing	The evaluator will review and the report in line with CARE and ADA comments.
20 th - 26 th February 2024 (up to 5 days)	Final Evaluation Report and Report Summary	The report is considered Final after the approval of CARE and ADA, and evaluator can proceed with the design, translation and adaptation of the Evaluation report, as well as development and design of the Report Summary.
27 th – 29 th February 2024 (1 day)	Presentation of the report	The Evaluator(s) will present the Evaluation report to CARE and ADA.
The Evaluator(s) will be engaged in the period October 2023 – February 2024 for a maximum of up to 60 working days. The Evaluator(s) will deliver the final products to CARE by February 26th, 2024.		



Note:

In case of field visits, the Evaluator(s) will be able to conduct interviews with partners' representatives, identified stakeholders and CARE's project staff during regular project activities with logistical support from CARE Project Manager. **Travel and food/refreshment costs will be covered via the contracted consultancy fee.**

The Evaluator(s) will be paid in two separate installments:

- First payment will be made upon submission the receipts of first invoice and consultancy time sheet (CARE will provide templates) with indicated tasks performed and dates of tasks to be implemented after the approval of the inception report and no later than 7 days after its submission. The first payment will include travel advance for the Field research. The total payment will correspond to a maximum of XX working days and travel costs.
- Second and final payment will be made upon submission of the receipts of the second invoice and consultancy time sheet with indicated tasks performed and dates of tasks to be implemented after evaluation report is approved, no later than 7 days after the submission day.

The payment for the work defined in the Contract will be made upon the work completion and the final product delivered to CARE, with all the necessary documentation as per CARE's administrative procedures.

The deadline for application is 27th October 2024, at 4 PM CET.

6. Coordination/Responsibility

The Evaluator(s) is/are expected to commit to the agreed timetable and outputs:

- Prepare a work-plan in agreement with CARE;
- Conduct desk research and deliver Inception report;
- Conduct Field researches based on agreed work plan;
- Submit draft and final evaluation report, as well as Evaluation Summary, in English language, based on agreed timeline and work plan;
- Submit Evaluation Report translated into BHS languages, Serbian and Albanian, based on agreed timeline and work plan.
- Maintain timely communication with CARE Project Manager;
- Coordinate logistics (organization of meetings, etc.) in agreement with CARE.

CARE commits itself to:

- Coordinate with the Evaluator(s) and agree on the work plan;
- Provide requested documentation to Evaluator(s);
- Provide logistical support to the Evaluator(s).

The Evaluator(s) will report to Sara Dereta, Youth Engagement Advisor, sdereta@care.rs

The Evaluator(s) will be responsible for leading and coordinating the whole process of the final evaluation based on inception report and including writing the final evaluation report.

7.Required Qualifications

The Evaluator(s) must meet following criterions:

1. More than 5 years of comprehensive professional experience in conducting evaluations.
2. Excellent oral and writing skills in English and in at least 1 local language (Albanian, B&H languages).
3. Ability to work in a team and under a pressure.
4. Prior evaluation experience of working in the Balkans region.
5. Prior experience with projects targeting young men and women beneficiaries and/or gender mainstreaming and/or educational policy is considered an asset.
6. Knowledge of the national/regional and EU public policies targeting prevention of gender-based violence and promoting gender equality is considered an asset.
7. Prior experience with Human Rights Based approach.
8. If consisting more than of one person, the evaluation team should be gender balanced.

The consultant should not have any links to project management, or any other conflict of interest that would interfere with the independence of the evaluation. Evaluators must be independent and impartial, meaning that the members of the external evaluation team themselves must not have been directly responsible for the project design or overall management of the subject of evaluation, nor expect to be in the near future. Evaluators must not have vested interests and must be given full freedom to access information, to conduct their evaluative work impartially and to present their findings based on the analysis of available evidence available.

8.Applications

Individual experts, companies or evaluation teams are eligible. The candidates (individual, company, or teams) are expected to include in the application:

1. **Cover letter (1 page)**
2. **Technical Offer** covering all aspects and tasks required in the ToR. The technical offer must include:
 - **Approach, methods, and design** including tentative work plan and division of responsibility (if team of consultants is applying) suggested by the applicant (3 pages);
 - **Professional profile of the evaluator(s)** (CVs of all individuals included in the consultancy team) indicating contacts on reference persons from at least three former employees/contractors;
 - **Reference list i.e., former evaluation reports** or other analytical outputs produced by the applicant.
3. **Financial Offer** including cost breakdown (2 pages).
 - The consultant(s) shall suggest the global price in EUR or BAM (per position if evaluation team applies) and the number of days predicted for the work.



- The global price must include all administrative costs needed for execution of the work/services to be contracted (such as but not limited to backstopping costs, insurance, reports, communication costs, rent for Contractor's facilities, translation costs, etc.), as well as a breakdown of travel, allowances, and accommodation expenses for Field Research 1 (as specified in the Timetable section).
- Prices must be in **gross amount** (free of all duties, taxes, and other charges, including VAT). The amount of VAT must be shown separately.
- **Note: If you are sending the offer as a physical person the amount should be net. Related benefits and taxes for physical person will be calculated and paid by CARE.**
- **Filled in a Request for Quotation Form. Please contact CARE Procurement Office at shalkic@care.ba to obtain the required Request**

Selection:

The applications will be assessed as follows:

- Financial offer 30%
- Technical offer 70%

Offers should be submitted by **27th October 2024, at 4 PM CET** to the following e-mail address: *Procurement Team, CARE International Balkans, e-mail address: shalkic@care.ba*

The selected will be notified in writing by **31st October 2023**.

9.Deliverables

The following documents have to be submitted via e-mail or other softcopy formats:

I. Inception Report

The Inception Report should be structures as follows:

1. Background, Purpose and Objectives
2. Evaluation Design and Approach
 - 2.1. Methodology and Methods
 - 2.2. Evaluation Matrix
 - 2.3. Data Collection Instruments
 - 2.4. Data Analysis
 - 2.5. Limitations, Risks and Mitigation Measures
3. Quality Assurance and Ethical Considerations
4. Workplan with division of labor in the evaluation team (if applicable)
5. Annexes

Please refer to Quality Checklist for Inception Report (Annex 5) of ADA's Guidelines for Programme and Project Evaluations.

The inception report should not be longer than 20 pages without annexes (ToR, overview of documents used, interview guidelines, etc). Arial or Times New Roman, line spacing 1.15, font 11.

II. Final Evaluation Report:



Should be no longer than 30 pages without annexes (Arial or Times New Roman, line spacing 1.15, font 11). Should be structured as follows:

1. Executive Summary
2. Introduction
3. Background and Context Analysis
4. Evaluation Design and Approach
 - 4.1. Methodological Approach
 - 4.2. Data Collection and Analysis Tools
 - 4.3. Limitations, Risks and Mitigations Measures
5. Findings
6. Conclusions
7. Recommendations
8. Annexes

Please refer to the Quality Checklist for Evaluation Report (Annex 6) of ADA's Guidelines for Programme and Project Evaluations.

- Should be based on OECD/DAC Evaluation Quality Standards as framework, as required by the donor, available at [link](#).
- Should present disaggregated data based on sex and age and country, when relevant.
- Should contain an executive summary (5 pages max).
- Where feasible, an overview based on country/locality differentiated data should be provided.
- Should provide an overview of the most important highlights (such as for instance best and bad practices, success stories, challenges, lessons learned) in separate boxes and illustrating the findings with quotations.
- Available monitoring tables developed through the project should be attached to the evaluation report after checking for consistency.
- Should respect the templates provided by CARE.
- The report must fulfill the requirements listed in the ToR.
- Completion and submission of Results Assessment Form as a mandatory annex to the valuation report.
- Should be translated in BHS languages, Serbian and Albanian.

III. Evaluation Summary Report:

- Should be no longer than 5 pages (Arial or Times New Roman, line spacing 1.15, font 11).
- Should be structured according to the Final Evaluation Report chapters:
 1. Executive Summary
 2. Introduction
 3. Background and Context Analysis
 4. Evaluation Design and Approach
 - 4.1. Methodological Approach
 - 4.2. Data Collection and Analysis Tools
 - 4.3. Limitations, Risks and Mitigations Measures
 5. Findings
 6. Conclusions
 7. Recommendations
 8. Annexes



- Should present disaggregated data based on sex, age, and country, if relevant
- Providing an overview of most important highlights (such as for instance best practices, success stories, challenges, lessons learned) in separate boxes and illustrating the findings with quotations.

IV. Results-Assessment Form for Final Project Evaluations.

All deliverables should be written in English.

V. Annexes:

Annex I: ADA Guidelines for Programme and Project Evaluations
Annex II: Brief project information from CARE webpage
Annex III: CARE's Monitoring and Evaluation Principles, Standards
Annex IV CARE gender marker vetting form and all guidance notes
Annex V: Baseline Study
Annex VI: CARE evaluation policy
Annex VII: CARE evaluation report template and report checklist
Annex VIII: Data Disclosure
Annex IX: ADA Evaluation Policy
Annex X: Results Assessment Form
Annex XI: Evaluation Matrix Template
Annex XII: Project Logical Framework



ANNEX III CARE's Monitoring and Evaluation Principles, Standards

MEAL principles

- ① are conducive to Accountability.
- ② are conducive to Learning and potentially to Multiplying Impact.
- ③ are conducive to Adaptation.

MEAL systems and practices

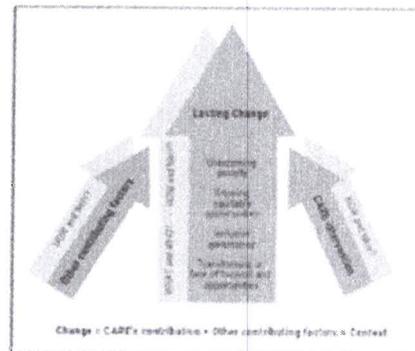
- ④ balance purpose, methodological rigor and capacity.
- ⑤ consider ethical implications.
- ⑥ are dynamic and lead to action and are conducive to gender equality.
- ⑦ contribute to CARE's global evidencing efforts.

MEAL standards

- ① Design your MEAL system based on a clear theory of change and evidence needs.
- ② Have a clear definition of participants: direct/indirect participants and target/impact groups.
- ③ Define a meaningful and manageable set of quantitative and qualitative indicators and/or questions for impact, outcomes and outputs in each participant group, and the methods to track them.
- ④ Define the monitoring and evaluation moments and methods that best ensure robust and comparable tracking of outputs, outcomes and impact.
- ⑤ Ensure your evidence can be translated into learning and support on the identification of potential for scale.
- ⑥ Make your evidence accessible and ensure your MEAL practices are participative and responsive to feedback.
- ⑦ Use your MEAL system to continuously read the context and adapt to it.

Foundations of CARE's MEAL Approach

- Reality is complex and dynamic.
- Lasting change does not follow a linear timeline or a single pathway, where multiple stakeholders interact and influence each other, as well as our interventions.
- There are constant adjustments in social, economic, structural, environmental or other dimensions that we must be critically aware of and adapt to.
- Lasting change is the result of CARE's contribution, as well as other factors, actors and elements of context.



The questions we aim at answering in all of CARE's projects or initiatives

- **WHO** are the specific populations (women, girls, men and boys) ultimately experiencing lasting change, and who are the other actors facilitating that change?
- **WHAT** changes are those populations experiencing?
- **HOW** and **WHY** are those changes happening and what role does CARE and other actors play in facilitating those changes?

Annex VIII Data Disclosure

The external evaluator should deliver, at minimum, all files including: quantitative data sets (raw and refined products), transcripts of qualitative data and others in an easy to read format, and maintain naming conventions and labelling for the use of the project/program/initiative and key stakeholders.

All documents should be compliant with the following conditions:

- CARE requires that the datasets that are compiled or used in the process of external evaluation are submitted to CARE when the evaluation is completed.
- Data must be disaggregated by gender, sex, age, and country, if relevant (refer to logical framework).
- In the case of textual variables, textual datasets, or transcripts, please ensure that the data is suitable for dissemination with no de-anonymizing information UNLESS these are case studies designed for external communication and suitable permission has been granted from the person who provided the data. In these circumstances, please submit, with the case study, a record of the permission granted, for example a release form.



- Where there are multiple datasets (for example both tabular and textual datasets), identifiers must be consistent to ensure that cases can be traced across data lines and forms.
- Formats for transcripts (for example: summary; notes and quotes; or full transcript) should be defined in collaboration between CARE and the external evaluator at the evaluation inception.
- The external evaluator will be responsible for obtaining all necessary permissions, approvals, insurance, and other required permits needed for data collection.
- CARE requires that datasets are submitted in one of CARE's acceptable format types. CARE must be informed of and approve the intended format to be delivered at evaluation inception phase. Should this need to be altered during the project CARE will be notified and approval will be needed for the new format.

Acceptable formats for data

Type of data	Acceptable formats
Tabular data with extensive metadata	<ul style="list-style-type: none"> ○ proprietary formats of statistical packages: SPSS (.sav), Stata (.dta), MS Access (.mdb/.accdb)
Tabular data with minimal metadata column headings, variable names	<ul style="list-style-type: none"> ○ widely-used formats: MS Excel (.xls/.xlsx), MS Access (.mdb/.accdb), dBase (.dbf), OpenDocument Spreadsheet (.ods)
Textual data	<ul style="list-style-type: none"> ○ widely-used formats: MS Word (.doc/.docx)
Image data	<ul style="list-style-type: none"> ○ JPEG (.jpeg, .jpg, .jp2) if original created in this format
Audio data	<ul style="list-style-type: none"> ○ MPEG-1 Audio Layer 3 (.mp3) if original created in this format