

***Application Form***

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| --- | --- |
| Name of NGO: |  |
|  |  |
|  |  |
| Project Name: |  |

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| --- |
| August 17, 2021 |
| This application contains 20 pages |
|  |
| Subsidy Request Form 210817 |

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# GENERAL DETAILS ABOUT THE ORGANISATION

## 1.1 Requesting organization.

|  |  |
| --- | --- |
| Name as Registered: |  |

|  |  |
| --- | --- |
| Registration number Chamber of Commerce: |  |
| Year established: |  |
| Doing Business As.: |  |
| Address: |  |
|  |  |
| P.O .Box: |  |

|  |  |
| --- | --- |
| Telephone: |  |
| Fax: |  |
| E-mail address: |  |
| Website: | www.  |

|  |  |  |  |
| --- | --- | --- | --- |
| (Legal) positionOrganization: | [ ]  foundation  |  |  |
|  | [ ]  association |  |  |

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| --- | --- |
| Tax Inspector: |  |
| Crib # |  |
|  |  |

## 1.2 Contact persons for this request.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name contact person: | [ ] M [ ] F |  |  |  |  |
|  | (gender) |  (title) |  (initials) |  (first name) |  (last name) |
| Function: |  |
| Telephone home: |  |
| Telephone office: |  |
| Cellular: |  |
| Fax number: |  |
| E-mail address: |  |

*1.3 Objective of the organization (please copy directly from Statutes).*

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*1.4. Name and functions of all board members.*

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*1.5.* ***Name and functions of Members of Management****.*

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***1.6 Please list the number of employees and volunteers (and hours committed to) the organization has:***

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*1.7* *Mention the 3 most recent events and projects of the organization.*

(Maximum one page).

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| --- | --- |
| Title of Project:  |  |
| Duration: |  |
| Costs:  |  |
| Activities: |  |
| Results: |  |
| Funded by: |  |
| Title of Project:  |  |
| Duration: |  |
| Costs:  |  |
| Activities: |  |
| Results: |  |
| Funded by: |  |
| Title of Project:  |  |
| Duration: |  |
| Costs:  |  |
| Activities: |  |
| Results: |  |
| Funded by: |  |

# PROJECT FOR WHICH YOU ARE REQUESTING FUNDING

*2.1 The title of the project*

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*2.2* *Short description of the project*

If the project is a component of a larger project, please explain the larger project & how this component contributes to the success of the overall project.

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*2.3a* *Which is the identified target group?*

How many persons are in the target group?

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*2.3b Number of persons for whom the project is intended*

How many people shall be reached with the project? In case the project has more target groups, kindly indicate quantities per group.

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| --- | --- | --- |
| **Target group** | **Number of persons by age and category** | **Total amount of persons** |
|  | **0-24** | **24-55** | **55+** |  |
| [ ]  General Population  |       |       |       |       |
| [ ]  Households |       |  |  |       |
| [ ]  Youth |       |       |       |       |
| [ ]  Elderly (60+) |  |  |       |       |
| [ ]  Disabled  |       |       |       |       |
| [ ] Teenage mothers |  |  |  |  |
| [ ] Other |  |  |  |  |

*2.3c Explanation for choice of Target Group*

Describe the Target group as chosen above with possible division in sub-groups.

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*2.4 What are the 3 most important objectives of this project?*

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| 3. |
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*2.5 Has your target group been involved in your project preparation and will they be
involved in your project implementation?*

Kindly explain.

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*2.6 Expected impact of project for the target group(s) on short term (less than 1 year), middle-long term (3-5 years) and long term (over 5 years). What impact would it have on the lives of the beneficiaries?*

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*2.7 Where will the project take place (which district/area)?*

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*2.8 Time planning of the project.*

Kindly indicate periods as precise as possible.

Take note of the period for your request to be handled. In addition, it is necessary to complete Addendum 1 (‘Time Planning’).

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| --- | --- | --- |
| Preparation starts as of: | (DD/MM/YYYY) |  |
| Execution starts as of: | (DD/MM/YYYY) |  |
| Completion project: | (DD/MM/YYYY) |  |
| Project closure including finances and contents: | (DD/MM/YYYY) |  |

*2.9 Has your organization organized a similar project in the past?*

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*2.10 How is this project part of the regular activities of your organization?*

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*2.11 Why do you feel your organization is qualified to execute this project?*

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*2.12 How will your organization continue its activities after the project financing from SMDF has ended?*

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# RESULTS OF THE PROJECT

*3.1 What will be the concrete results of the project: products and/or services delivered by the project?*

Formulate the results using the SMART criteria: **S**pecific, **M**easurable, **A**chievable/**A**ttainable, **R**ealistic and **T**ime-Bound terms.

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| --- |
| S |
| M |
| A |
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*3.2 What activities will be executed during the project period?*

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*3.3 How will the results of the project be measured and reported (quantitatively and qualitatively)?*

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*3.4 What are the core Operational Project Activities and sub-components?* *Link your activities as noted in 3.2 to the Time Planning in Appendix 1*

When will each important activity be executed and/or which results will be visible?

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*3.5 How will the monitoring of the project take place?*

Who is going to do the monitoring and how?

Describe, if necessary, the method and the distribution of tasks and responsibilities.

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*3.6 How will the project’s success be measured?*

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3.7 *How will the project be publicized?* What is the media strategy for this project?

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# PROJECT ENVIRONMENT

*4.1 Are other organizations involved with this project?*

If yes, which organization(s), and how will they be involved?

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*4.2 Do you know of other organizations which are (or have been) working on similar objectives/projects?*

If yes, which? Have you sought collaboration?

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*4.3* *If the project is implemented in one specific place, are you the owner of the land or the building where the project is realized, or do you rent or lease this?*

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| --- | --- | --- |
| [ ]  property | [ ]  rent | [ ]  lease |
| [ ]  others, 5.g.  |

In case of rent or lease, kindly answer questions in 4.4.

Otherwise proceed to 4.7

*4.4 Who is the owner of the land or the building?*

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
|  | Phone Number: |
|  | E-Mail address: |

 *4.5 What rent/lease term did you agree on and how long is the term?*

|  |  |
| --- | --- |
| Term: | [ ]  indefinite  |
| [ ]  definite, for: |  | years | Up to:  |  |

*4.6 Who is financially responsible for the maintenance of the land or building?*

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*4.7 Will additional works be required to have the venue meet the project’s needs?*

If yes, kindly describe these.

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*4.8 What are the threats to the success of this project?*

Please describe these threats and how they will be addressed.

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*4.9 Is support from Government authorities necessary for the project?*

If yes, point out what this consists of and which measures have been taken hereto (example – permits, operational subsidies and so forth).

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# COSTS & FINANCING OF THE PROJECT

(Mention all amounts exclusively **in Guilders**).

## Total costs of the project and the status of the financing.

 *Total costs of Project – ANG \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Requested amount** | **Granted** | **Pending** | **Rejected** |
| SMDF | ANG | [ ]  | [ ]  | [ ]  |
| Government | ANG | [ ]  | [ ]  | [ ]  |
| Organization’s own contribution | ANG | [ ]  | [ ]  | [ ]  |
| Participant’s contribution  | ANG | [ ]  | [ ]  | [ ]  |
| Sponsors | ANG | [ ]  | [ ]  | [ ]  |
| Other Funding Agencies | ANG | [ ]  | [ ]  | [ ]  |
| Other | ANG | [ ]  | [ ]  | [ ]  |
| Other | ANG | [ ]  | [ ]  | [ ]  |
|  |
| Total requested | ANG  |  |
| Total granted | ANG  | [ ]  |  |  |
| Total still pending | ANG  |  | [ ]  |  |

SMDF would like to be informed about pending or decisions made by other funding agencies and lenders.

*5.2 Why is funding from an external donor necessary?*

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*5.3 If no contribution has been requested from other funding agencies, or if there is no contribution from your organization or the participants, kindly explain why not.*

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*5.4 Is there any income to be expected from the project?*

If yes, what amount and what are you going to do with income or how will the income be used?

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*5.5* ***If it concerns a long-term project: how, and by whom, will the exploitation of the project be covered for the next 3 to 5 years?***

If necessary, attach specification separately.

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*5.6 Is your organization receiving funding from another local or international funding agency?*

If yes, please explain and provide details about the agency, and expenses covered.

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*5.7 Do you expect important changes in your financing in the coming year or years?*

If yes, please explain.

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# ADDENDUMS AND GENERAL QUESTIONS

*6.1 Please check off the attachments you are sending in with your application.*

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| --- |
| **Required attachments:** |
| 1. Time planning
 | [ ]  attached |
| 1. Budget in the form of a Financing Plan
 | [ ]  attached |
| 1. Statutes / Articles of Incorporation
 | [ ]  attached |
| 1. Chamber of Commerce Excerpt, no older than 6 months
 | [ ]  attached |
| 1. Organization Plan / Organogram
 | [ ]  attached |
| 1. Balance sheet, Income/Financial Statement as submitted to Tax Inspectorate
 | [ ]  attached  |
| 1. Other quotations (if applicable)
 | [ ]  attached |
| 1. Photographs of Program Activities
 | [ ]  attached |

|  |
| --- |
| **Extra attachments (not required):** |
| 1. Resume Applicants (if new)
 | [ ]  attached | [ ]  n/a |
| 1. Project Description / Business Plan:
 | [ ]  attached | [ ]  n/a |
| 1. Rental Agreement:
 | [ ]  attached | [ ]  n/a |

***6.2 Further details or remarks which are of importance for your request.***

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*6.3 How did you hear of SMDF?*

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# SIGNATURE

**Signature must be of an authorized person or registered competent persons, as indicated in the Chamber of Commerce Excerpt and Articles of Incorporation.**

Truthfully completed:

|  |  |
| --- | --- |
| Place: |  |
| Date: |  |

|  |  |
| --- | --- |
| Name 1: |  |
| Function: |  |
| Signature: |  |

|  |  |
| --- | --- |
| Name 2: |  |
| Function: |  |
| Signature: |   |

|  |
| --- |
| **Attention! Please do not forget the following details:*** + Check if all sections of the request form are filled out and if all required attachments are attached;
	+ Make a copy for your own administration;
	+ Drop off the original hardcopy to SMDF’s Office;
	+ Send in all attachments and number them;
	+ Send a copy of the request form in digitally WORD format to: info@smdf.sx
 |

##### **Notes to Financing Plan**

##### General

The budget must be set up on the basis of the activities to be executed.

##### Own contribution

The aim is that all organizations make a financial contribution towards the implementation of the project. This contribution can come from the target groups(s), participants, other third-party donors or the organization’s own resources.

# Appendix 1. Financing Plan

The Financing Plan provides a full overview of all project costs and how they will be financed. Project Activities are key activities that must be done for the project to be successful. Components are the individual actions, within the Project Activity, that must be done to have the activities be successful. Project Activities can include Personnel Costs and Components can include the cost of individual employees. Similarly, other Operational Activities can be Utility, Housing, Material and Transportation costs etc.

You are to list each Project Activity and Component as well as the source of the funds for the activities, be it from your SMDF request, project target group, own funds or third parties.

Using the activities indicated in your response to question 3.4, list each Project Activity and its Component. **You are encouraged to use the attached Excel Budget Template spreadsheet.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **(in ANG)** | **Contribution from SMDF** | **Contribution from Target group** | **Own contribution** | **Contribution from third parties** | **Total** |
| 1 | Project Activity[[1]](#footnote-1) |  |  |  |  |  |
| 1.1 | Component |  |  |  |  |  |
| 1.2 | Component |  |  |  |  |  |
| 1.3 | Component |  |  |  |  |  |
| 2 | Project Activity |  |  |  |  |  |
| 2.1 | Component |  |  |  |  |  |
| 2.2 | Component |  |  |  |  |  |
| 2.2 | Component |  |  |  |  |  |
| X | Project Activity |  |  |  |  |  |
| x.x | Component |  |  |  |  |  |
| x.x | Component |  |  |  |  |  |

# Appendix 2. Time Planning

*The Time Planning indicates when specific project activities will be executed.*

*Using the activities indicated in your response to question 3.4, indicate during which week or month of the project period the specific activities will take place.*

|  |  |
| --- | --- |
|  | Calendar per week/month[[2]](#footnote-2) [[3]](#footnote-3) |
|  |  | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk | mnth/wk |
| 1 | Project Activity |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.1 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.2 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.3 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.4 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 | Project Activity |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.1 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.2 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.3 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.4 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 | Project Activity |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.1 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.2 | Component |  |  |  |  |  |  |  |  |  |  |  |  |
| x | Etc. |  |  |  |  |  |  |  |  |  |  |  |  |
| x.x | Etc. |  |  |  |  |  |  |  |  |  |  |  |  |

1. Fill in the results and activities as described in 3.4. [↑](#footnote-ref-1)
2. For projects with a time lapse shorter than 3 months, the timeline must be displayed per week, for projects with a longer time lapse per month. [↑](#footnote-ref-2)
3. For projects with a time lapse longer than 6 months, the milestones must be displayed clearly. [↑](#footnote-ref-3)