

Annex A - NATIONAL GRANT APPLICATION FORM



SECTION A: ORGANISATION'S PROFILE

Name of Organisation:			
Address:			
Telephone Number		Official Email Address:	
Registration Number		Date of last Audit:	
Year Established		Auditor's Name:	
Number of Members:			

1. Details of your governing body or board including names of board or Executive Committee members			
Name	NIN	Occupation	Position in Organisation

2. What are your organisation's objectives (include your mandate, vision, sector you operate in and Mission Statement)?	
Mission Statement / Vision	
Area of Intervention	
Objectives	

3. Summarize your Organisation’s history. Outline current programs and activities and main beneficiaries. Highlight accomplishments of your Organisation.

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4. If you received have previously received funding from Government. If yes, please state how much did you receive and what did you do with the funds?

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5. What are your organisation’s major sources of funding?

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SECTION B: PROJECT NARRATIVE

Project Title:			
Project Location:			
Project Start Date:		Project End Date:	
Total Budget Requested:			
Project Coordinator:			

6 PROJECT SUMMARY, GOALS AND OBJECTIVES
This section should contain a clear and specific statement of what the proposed project will accomplish. It should include the problem statement, project rationale, goal, objectives, outputs, activities and expected outcomes.

6.1 Problem Statement: *Provide brief analysis of the issue your project aims to address. Substantiate with research data, statistics with clear references / sources.*

6.2 The Rationale of the project: *(This should explain the reasoning behind the need for the proposal. Demonstrate the relevance of the proposal to the problem identified. It should also explain the reasons and interest of developing a partnership with other organisations such as government agencies, NGOs or community organization for the project implementation.*

6.3 The specific Goal of the project *(What will be achieved at the project end)*

6.4 The Specific Objectives of the project proposal

6.5 The Specific Outputs that the project aims to produce

6.6 The Specific Activities the project will conduct *(How the activities will provide the desired solutions?)*

6.7 Beneficiaries of the Project *(who are they, how many, how will this project contribute to their development and self-sufficiency - 200 words maximum)*

6.8 Expected Outcomes <i>(The measurable changes that will have occurred by the end of the project)</i>	
Outcomes	Indicators

6.9 State the National Strategic Priority /Sustainable Development Goals (SDGs) which aligns to your project

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7. INDICATIVE PROJECT IMPLEMENTATION PLAN

The project Implementation Plan indicates the sequence of all major activities and implementation milestones, including targeted beginning and ending dates of the project for each step. Expand the table rows as appropriate for your project.

Project Outcome:

Specific Objective 1 :

Outcomes:

Expected Outputs

Activities (specify each activity)	Timeline of Activities				Planned Budget			
	Q1	Q2	Q3	Q4	Sources of Funds	Resources needed for each activity	Responsibility for implementation	Total Amount
1.1.								
1.2								
1.3								
							SubTotal	
Specific Objective 2 :								
Outcomes:								
Expected Outputs:								
2.1.								
2.2								
2.3								
							SubTotal	

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Specific Objective 3 :								
Outcomes:								
Expected Outputs								
Activities (specify each activity)	Timeline of Activities				Planned Budget			
	Q1	Q2	Q3	Q4	Sources of Funds	Resources needed for each activity	Responsibility for implementation	Total Amount
3.1.								
3.2								
3.3								
SubTotal								
Specific Objective 4 :								
Outcomes:								
Expected Outputs								
4.1.								
4.2								
4.3								
SubTotal								

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8. BUDGET

The budget should be realistic and include all costs associated with managing and administering the project. The grant should be used only for costs which directly relate to efficiently carrying out the activities and producing the objectives which are set forth in the project proposal. Other associated costs should be funded from other sources. Adapt this table to the phases or lifetime of your project.

PROJECT/PROGRAM DIRECT COSTS

Objectives	Activities	Resources	Unit Cost	Total cost	Requested Grant Amount
Objective 1	Activity 1.1				
	Activity 1.2				
	Activity 1.3				
SubTotal					
Objective 2	Activity 2.1				
	Activity 2.2				
	Activity 2.3				
SubTotal					
Objective 3	Activity 3.1				
	Activity 3.2				
	Activity 3.3				
SubTotal					
Project Coordinator					
ADMINISTRATIVE COSTS					
ADMIN COSTS. <i>Please itemized the admin costs. May not be more than 10% of total requested from National Grant</i>		Telephone			
		Printing & Photocopies			
		Communication			
		Stationaries			
SubTotal					

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Total Project Cost			
Organisation's contribution <i>Minimum 10% contribution towards the project either in cash or in kind.</i>			
Indicative Co-Funding <i>(Provide details of the source of the co-finance and the amount of the co-finance)</i>			
Total Grant Requested			

9. METHODOLOGIES & IMPLEMENTATION STRATEGY

Briefly describe what mechanisms/ strategies will be put in place to ensure successful implementation of the project

10. RISKS TO SUCCESSFUL IMPLEMENTATION AND MITIGATION MEASURES

Identify and list the major risk factors that could result in the project not producing the expected results. These should include both internal factors (for example, the technology involved fails to work as projected) and external factors (e.g changes to laws or regulations).

Risk/Factors	Risk category <i>(e.g. political, social, economic, technological, environmental, legal)</i>	Potential level of impact <i>(e.g. low, medium, high)</i>	Risk mitigation measures

11. PROJECT SUSTAINABILITY AND LONG-TERM IMPACT

Provide an explanation how this project will continue and sustain itself logistically and financially after the Government provided grant term is over. Describe approaches and methods for ensuring the sustainability of the project and the possibility for replication or scaling-up.

12. ADVOCACY & COMMUNICATIONS

How will the project use communications and public education as tools towards achieving results? For example, organisation of public events, publication of news announcements etc.

GRANT APPLICATION CHECKLIST FOR SUBMISSION

Before you send this grant application form, please ensure that you have enclosed ALL of the mandatory documentation listed below.

	CHECK
1. Copy of the Organisation’s Certificate of Registration	
2. Copy of Identification documents of key office bearers of your Organisation (Chairperson, Vice-Chairperson, Treasurer, Secretary)	
3. Certified Copy of Audited Financial Statements for the preceding year	

Once you have answered Yes to ALL of the above, Project Proposals **must be submitted both hard copy and electronically.** Documents in hard copy need to be submitted in a sealed envelope and addressed to:

**National Grants Committee
 Comptroller General’s Office
 Financial Planning & Control Division
 Department of Finance
 Liberty House**

Documents sent electronically must be emailed to nationalgrantcommittee@gov.sc

IMPORTANT NOTE: Grant applications that are incomplete or submitted later than the imposed deadline or that do not meet the eligibility criteria or do not follow these instructions would be automatically rejected.

DECLARATION

I, declare that all the information provided in this grant application form and all supporting documents are true and accurate. I confirm that I have the authority to make the application on behalf of the organisation.

In lodging this application, I give my consent to the National Grants Committee through the Ministry of Finance, Trade, Investment and Economic Planning to undertake the necessary searches and checks to verify the authenticity of the information provided.

I agree to comply with requests from National Grants Committee, for additional information to be provided.

Name of Authorised Signatory

Signature

Date

FOR OFFICIAL USE ONLY

Date Received: _____

Date Reviewed: _____

Recommendations _____

This application is approved / declined: _____

Date of Approval/ Decline: _____

Amount Approved: _____

Signature NGC Chairperson

Signature NGC Vice-chairperson

Signature NGC Member

Signature NGC Member

Signature NGC Member

Signature NGC Member

Signature Committee Member