

TITLE OF PROJECT: _____

Full name and address of organization applying:

Amount requested: _____

Local contribution: _____

Duration of the project: _____

Number of beneficiaries: _____

Village or Quarter: _____

Region: _____

Telephone: _____

E-mail: _____

Project Address (if different from organization's address):

Village or Quarter: _____

Region: _____

Primary CONTACT PERSON:

Name: _____

Telephone: _____

Title/Organization: _____

E-mail: _____

Organization DUNS number: _____

If organization does not have a DUNS number and has difficulty in obtaining one, we can assist if project is preselected.

Who will manage the grant money and the project? List key personnel, title(s), experience, and qualifications.

Project Coordinator: _____

Telephone: _____

E-mail: _____

The use of this form is optional

Other Key Personnel:

- 1.
- 2.
- 3.

Organization Information:

Type of Organization:

(EX: NGO, Women's Association, Village Association)

Date of creation:

About the organization:

(Please give historical background and description, previous activities and projects implemented, core activities, and number of members)

Does the organization have a bank account? Yes No

If yes, please provide the bank details as an attachment

PROPOSAL SUMMARY:

Short narrative that outlines the proposed project, including project objectives and anticipated impact.

The use of this form is optional

Project Category

Select the category below

- Income Generating** **Health** **Education** **Agriculture**
 Environment **Energy** **Arts and Crafts** **Water**
Sanitation and Hygiene **Other**

PROBLEM STATEMENT:

Clear, concise, and well-supported statement of the problem to be addressed and why the proposed project is needed

Project Goals and Objectives:

The “goals” describe what the project is intended to achieve. The “objectives” refer to the intermediate accomplishments on the way to the goals. These should be achievable and measurable.

Project Activities:

Describe the project activities and how they will help achieve the objectives.

- 1.
- 2.
- 3.

The use of this form is optional

Beneficiaries:

How many people will directly benefit from this project? Direct beneficiaries are the people who will actively engage with the project (Example: 15 women will be able to use the sewing machines, or 35 school age children will receive educational kits).

Women 18 yrs+	
Girls 0-17 yrs	
Total Females	

Men 18 yrs+	
Boys 0-17 yrs	
Total Males	

Total direct beneficiaries (Please mention who they are):

How many people will indirectly benefit from this project? Indirect beneficiaries are people who will not engage directly with the project but will still benefit from it. Please provide the number and mention who are they:

Please describe how you plan to sustain the project after Self Help funding expires

What are the foreseen risks of this project and how do you plan to address them

If proposal has any training activities, please provide general details below and include the training plan as an attachment

The use of this form is optional

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FINANCIAL SUMMARY:

What is the total cost of this project? _____
How much money are you requesting from the United States Embassy? _____

What are the organization's and/or community's contributions to this project? Please be specific and list the estimated value of community contributions.

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Please attach a detailed budget that includes the estimated expenditures necessary for the implementation of the activity, as well as pro forma invoices from at least two different sources. Use the attached budget format (Sample A) to list all budget items. Please be specific. All proposals should provide an activity timeline (Sample B) which is in line with the provided budget.

When completed, will the project produce income? YES NO
How much? _____

Who will control any income generated, and how will it be used? Please provide detailed information regarding future plans for the project and for the income generated through this project

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Applicant Signature

I certify that all information contained in this form is correct to the best of my knowledge.

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The use of this form is optional

SSH 2021 Application Form

Print Name	Signature	Date

Please enclose with your application an endorsement letter from the community leader, chief of village, prefect, or relevant official indicating support for your project.

The use of this form is optional

Sample A

	Description of Items(materials, equipment, supplies)	Unit Price	Quantity	Total GNF	Local Contribution	SSH Contribution
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
	Total					

The budget should be stated in local currency and include notes explaining the costs associated with each of the budget line items and other relevant information to support the proposal's budget. There should be a direct relationship between the activities described in the proposal and the budget.

The use of this form is optional

Sample B:

Project Implementation Plan

Phase	Period of implementation	Activities	Results	Monitoring and Evaluation
Phase 1	EX: October 2018	Activity 1.1 :	Result 1.1 :	
		Activity 1.2 :	Result 1.2 :	
		Activity 1.3 :	Result 1.3 :	
Phase 2		Activity 2.1 :	Result 2.1 :	
		Activity 2.2 :	Result 2.2 :	
		Activity 3.3 :	Result 3.3 :	
Phase 3		Activity 4.4 :	Result 4.4 :	

The use of this form is optional

LOCATION: WHERE CAN WE FIND YOUR PROJECT?