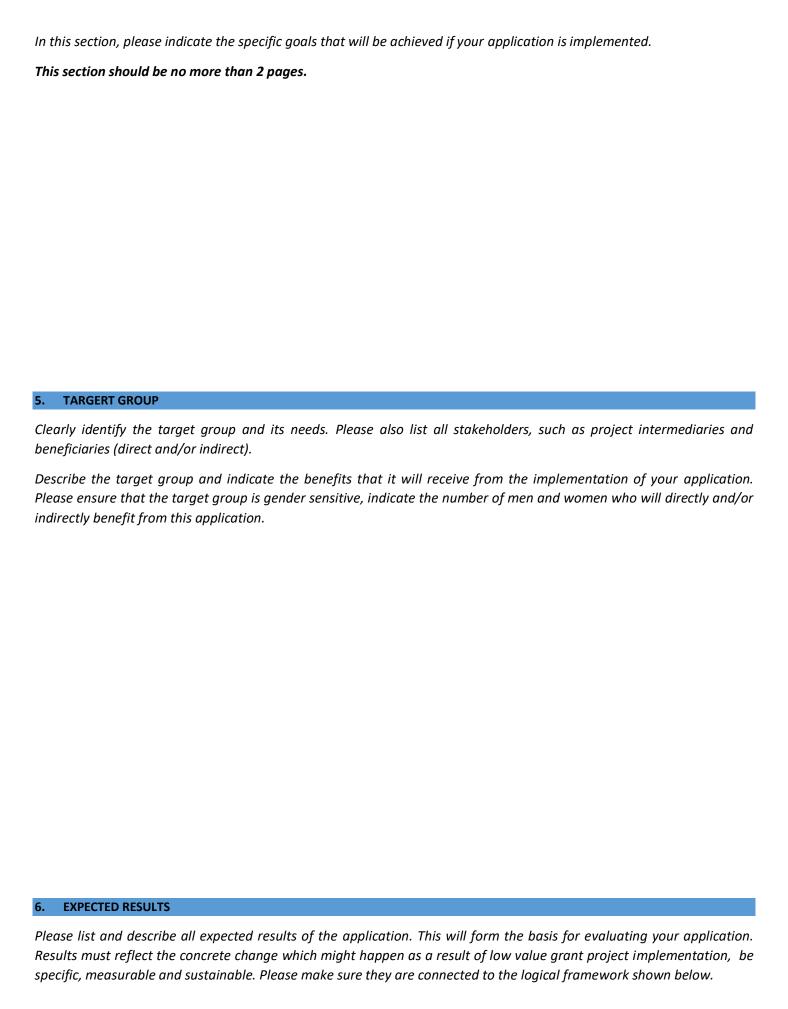
# **APPLICATION FORM FOR LOW-VALUE GRANT PROJECT**

APPLICATION TITLE: (name of the low-value grant project)
ADLLICANT/ NAME.
APLLICANT' NAME:
IMPLEMENTING PARTNERS:
IMPLEMENTATION OF THE LOW-VALUE GRANT PROJECT IN THE FOLLOWING AREA:
LOCATION
BUDGET
CONTACTS

1. DESCRIPTION OF THE O	RGANIZATION / NONGOVE	RNMENTAL ORGANIZATION	
Mission (Goal and Objec-			
tives)			
Date of establishment			
Funding sources of the			
core budget and please			
describe implementation	1		
of existing projects			
Management (Board) of th	ne non-governmental organi	zation / Key persons in the orgar	nization
Full name	Profession	Functions	Work experience in years
Full name	Profession	Functions	Work experience in years
Previous experience in imp	plementing the projects in th	ne proposed field of activity (atta	ch descriptive reports)
Theme/ Sphere	Project Name	Donor	Budget
l	1 Toject Hume	356.	Suager
1			

In this section, you shall give a brief overview of the problem that your organization is trying to solve as part of this low-value grant project. Please describe a problem that you propose to solve as part of your application; if possible, provide clear statistical data and indicators of the problem. Why is your project necessary, timely? Who needs this?
This section should be no more than 2 pages.
3. APPLICATIONS DESCRIPTION
In this section, you shall provide a clear and detailed description of activities that are required to be performed to achieve your purposes. Please provide detailed information on any additional qualities of your application, such as a relevance, the expected number of people that would gain direct and/indirect benefits given the gender equality, sustainability of the low value grant project, risks analysis, monitoring.
If the application envisages partnerships with other organizations, please describe the role of partners and the scope of cooperation.
This section should be no more than 3 pages.
4. OVERALL AND SPECIFIC GOALS
Please explain what the specific goal of your application is, with particular attention to the long-term and sustainability of the benefits for the target groups that it will provide. The application may have one or more specific goals that the community would reach upon solving the problem



# **ACTIVITIES** This section should provide an overview and description of the activities that will help to achieve the expected results. The activities should be clear and should also be indicated in the work plan, which is an appendix to your application. 8. RISKS Please provide an overview of possible risks (political, economic, social) that may jeopardize the implementation of the application and its success, as well as your action plan on risks mitigation. Please make sure that there is a link to the logical framework. LOW-VALUE GRANT PROJECT LIFE CYCLE Please indicate the low-value grant project implementation timeframe.

10. MONITORING AND EVALUATION
Describe how the application will be monitored and evaluated. How will the quality of completed tasks, accountabilit and transparency of the allocated budget be ensured?

### **APPENDIX 2: WORK PLAN**

Nos.	Plan	Month											
1	Expected result 1	1	2	3	4	5	6	7	8	9	10	11	12
1.1	Activity 1.1												
1.2													
1.3													
1.4													
1.5													
2.	Expected result 2												
2.1													
2.2													
2.3													
2.4													
2.5													
3.	Expected result 3												
3.1													
3.2													
3.3													
3.4													
3.5													

### **APPENDIX 3: BUDGET BREAKDOWN**

(To be filled in Excel format)

Nos.	Category	Unit	Number of units	Total USD	Requested amount in USD	Applicant's contribution
F	Result 1					
1.1						
1.2						
1.3						
	Result 2					
2.1						
2.2						
2.3						
2.4						
2.5						
	Result 3					
3.1						
3.2						
3.3						
3.4						
3.5						
5	Own contribution					
Tota	I USD	•				

## **APPENDIX 4: LOGICAL FRAMEWORK**

	Intervention logic	Objectively confirmed achievement indicators	Sources and means of confirmation	Assumptions
Overall goal				
Specific goals				

	Expected results	Results					
	Activities						
		Арре	endix 5: Qualification State	ment			
I, the undersigned, hereby confirm that the information provided in this form is true and complete. I understand that false or misleading information in this statement will lead to its rejection.							
Signat	ure:						
Date:							
		Appendix 6: A	Anti-Corruption Obligation				
declar corrup execut	e that any offer ot practice was i tion of this Con	clare the intention of (the f, gift, payment, remunera not and should not be dir atract. Any action of this	e name of organization) to tion or benefit of any kind ectly or indirectly associat kind is a sufficient reason all compensation for its effo	fight corruption and, in p that is considered an ille ed with any person relat to justify the termination	gal act or ed to the		
Signat	ure:						
Date:							

### **Appendix 7: Anti-Discrimination Obligation**

I, the undersigned, hereby confirm that (the name of organization) as a whole refrains from the incitement of violence or hatred and from discrimination based on race, age, ethnic origin, gender, sexual orientation, gender identity, disability or religion. Such an obligation covers all the activities carried out by the organization, including those beyond the scope of this Contract. Any violation of the above obligation justifies the immediate termination of this Contract and gives UNDP the right to demand full compensation for its effective contribution.

Signature:		
Date:		