**Application Template**

1. **Partner Details:**

|  |  |
| --- | --- |
| **i. Application Date:** |  |
| **ii. Organisation Name:** |  |
| **iii. Organisation Registration Date:** |  |
| **iv. Organisation Registration Status:** |  |
| **v. Office Address:** |  |
| **vi. First Contact Person:**  (Name, designation, tel, email, skype) |  |
| **vii. Second Contact Person:**  **(**Name, designation, tel, email, skype) |  |
| **viii. Other partners involved in this proposal:**  (Names and contacts) |  |
| **ix. Grant request amount (UGX):** |  |
| **x. In-kind/Third party contribution amount (UGX):** |  |

1. **Partners’ Current Business**

|  |
| --- |
| **i. Background and business description:**  **(*Describe the organisation, its purpose, nature/type of business including the business ownership/management structure)*** |
|  |
|  |

|  |
| --- |
| **ii. Highlights of past performance and related experience** |
|  |

1. **Partnership Proposition**

|  |  |
| --- | --- |
| **Timeframe:** | 12 months (DD/M/2021)- DD/M/2022 |
| **i. Name/Title of the proposed grant activity:** |  |
| **ii. Objective of the proposed grant activity:** |  |
| **iii. What is the** **issue or problem that the activity will address? Why is it critical to address this issue?** |  |
| **iv.** **Identify beneficiaries (disaggregated by refugees, host communities, gender and age) how the grant activities will reach the intended beneficiaries, and how beneficiaries will benefit from the grant.** |  |
| **v. -Value proposition and description of offering:** | |
| |  | | --- | |  | |  | |  | |  | | |
| **vi. Business case of the proposal** | |
|  | |

|  |
| --- |
| **vii. Specific Activities and Deliverables:** |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Name of Activity** | **Responsible Person** | **Resources Required** | **Start and End Date** | **Output/Expected Result** | **Deliverables** | | Name of Activity 1 |  |  |  |  |  | | Name of Activity 2 |  |  |  |  |  | | ***(Insert more rows as needed)*** |  |  |  |  |  | |

**4. Activity Budget**

**Approximate cost of this activity (include cash, in-kind [i.e., donated goods or services], and third-party sources). Illustrative budget categories have been provided, however please adjust or add as needed. Please attach accompanying budget notes separately in the format provided in Annex 2**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Budget Category** | **Grant Funding**  **(UGX)** | **Grantee Contribution (UGX)** | **In-Kind Contribution**  **(UGX)** | **Third Party Funding**  **(UGX)** | **Total Funding (UGX)** |
|  |  |  |  |  |  |
| Personnel (Salary and Wages) Costs: |  |  |  |  |  |
| Fringe Benefits: |  |  |  |  |  |
| Travel and Transportation: |  |  |  |  |  |
| Other Project Direct Costs: |  |  |  |  |  |
| Training: |  |  |  |  |  |
| Supplies: |  |  |  |  |  |
| Total Estimated Costs (in UGX) |  |  |  |  |  |
| *[Add more rows as needed.]* |  |  |  |  |  |

(Complete in excel and import)

**5. Implementation Plan:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Activity / Months** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
| **1.** | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2.** | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3.** | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4.** | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

**6. Anticipated Risks, Mitigation and Sustainability Measures:**

|  |  |  |
| --- | --- | --- |
| **Anticipated Risk** | **Mitigation Measure** | **Sustainability Measure** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**7. Marketing Plan:**

|  |
| --- |
| **Marketing plan** |
|  |

**8. Business Development Services (BDS) requirements:**

|  |
| --- |
| **BDS:** are there likely to be any BDS services that would strengthen this initiative?  (e.g., Business Modelling, Distribution Models, Sales and Marketing, Customer Experience and Retention, Human Resources Management, Influencing and Negotiation Skills, Financial Planning Business Development Training, Coaching, Mentoring, Financial Services, Cooperative Development etc.) |
|  |

The below signatory confirms that the grant applicants are aware of and agree to the content of the application and are informed.

**Signed by potential partner**

|  |  |
| --- | --- |
| **Name:** | **Designation:** |
| **Date:** | **Signature:** |

|  |  |
| --- | --- |
| **Name:** | **Designation:** |
| **Date:** | **Signature:** |

9: Grant Submission

Once all sections of the application have been completed, the grant agent submits the application to via email to grants@ag-ploutos.com