**Project Application for Funding by the Canada Fund for Local Initiatives (CFLI)**

***All text in blue is for assistance in filling out the form. You may delete all blue writing and/or replace with project proposal information.***

**PROJECT IDENTIFICATION:**

1. **Project Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Please provide a descriptive title, For example: strengthening democratic participation of women in Country X elections with information workshops)*

1. **Location of Proposed Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City/village: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Name of applicant organization/group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title/function: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Organisation website (if any): ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Brief description of the applicant organization/group**: (i.e. date of establishment of the group, mandate, membership, etc.)
2. **Type of organization/group: *Please check one type.***
* Local non-governmental, community and not-for-profit organizations,
* Local academic institutions working on local projects,
* International, intergovernmental, multilateral and regional institutions, organizations and agencies working on local development activities,
* Municipal, regional or national government institutions or agencies of the recipient country working on local projects, and
* Canadian non-governmental and not-for-profit organizations that are working on local development activities.

**PROJECT DESCRIPTION:**

1. **CFLI Priority: *Please check one priority***
* Championing inclusive and accountable governance, peaceful pluralism and respect for diversity, and human rights;
* Promoting gender equality and empowerment of women and girls;
* Promoting stability and security;
* Addressing climate change and enhancing environmental sustainability;
* Stimulating sustainable and green economic growth;
1. **Explanation of the project**:

*Please provide a brief description of your project answering the following questions. The description should not exceed one page)*

* What is the purpose of the project? What are the main activities of the project (in point form only)?
* What will the project achieve, i.e., what are the immediate expected results of the project? What changes are directly attributable to the project activities?
* Over what period of time will the project be implemented?
* Are there any major risks of which you are aware that could affect the successful implementation of the project? How will they be reduced?
* Other features of the project which you consider important.
* Describe any possible environmental impacts or benefits the project might have.
1. **Origin and Context:**

Describe the region and community where the project will be implemented and the reason motivating the request for assistance.

1. **Beneficiaries and Participants:**

*Please answer each question separately.*

* Who will benefit from the project and how will these benefits be realized? (Total number of recipients and number of women/children.)
* Were the beneficiaries involved in the decision to seek funding and the planning and design of the project? If so, how?
* How and to what extent will the beneficiaries participate in the implementation of the project?
* When the project has been completed, what will their future participation be?
* List the names of the members of the local committee responsible for submitting this proposal along with their functions and responsibilities.
* List the names and responsibilities of the key individuals to be involved in the implementation of the project.
* How have you considered the differential impact this project will have on women and men, boys and girls in the community?
1. **Summary Project Budget: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CAD**

Show the proposed budget by type of activity and who would contribute to each activity. A sample format follows:

|  |  |
| --- | --- |
| (Type of activity) | (Contribution by :) |
| Canada |  | Recipient(s) |  | Others\* |  | Total |
| Services |  |  |  |  |  |  |  |
| Training |  |  |  |  |  |  |  |
| Equipment |  |  |  |  |  |  |  |
| Construction |  |  |  |  |  |  |  |
| Administration expenses |  |  |  |  |  |  |  |
| Others (specify) |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |

\* Specify source of, and reason for, other contributions.

1. **Resources requested from the Canada Fund**

Specify the exact nature of the assistance requested from the Canada Fund that the budget will be used for, for example: type/kind of services, training, advocacy, research, equipment, products, etc.

1. **Past Experience**:
* Describe any (relevant) projects already implemented by the community, including the source of funding, the means of execution, and the results.
* Give information on any previous projects supported by the Government of Canada - when was the project funded, for how much, what Program or Department, whether the project was successfully completed.
* Has the organization received Canada Fund funding in the past? If so, please provide details including when, amount of funding received, location, and project title.

**Proposal Prepared by:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

More than one signature may be given, if desired. Please submit your application in Word document; please scan the last page with the stamp