### **APPLICATION FORM**

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| ***Questions*** | ***Replies*** |
| ***General Information*** | |
| **Name of organization/ Initiative group** |  |
| *Legal form* |  |
| *e-mail* |  |
| *Web page* |  |
| *Post address* |  |
| **Name of director of the Organisation according to the registration docs ( for the Initiative group - name of leader)** |  |
| *Contact Phone, e-mail* |  |
| **Name of person, responsible for campaign realization** |  |
| *Contact Phone, e-mail* |  |
| **Information about Fiscal agent (FA) *(applicable for initiative group only)*** | |
| *Name of organisation* |  |
| *Name of director/leader* |  |
| *Contact information (e-mail, phone, address)* |  |
| **Organization registration number *(for initiative group this section should be filled by FA)*** |  |
| **Organization/initiative group profile *(up to 200 words)*** |  |
| **Which community/communities organization work with/represent** |  |
| ***Discription of the conducted research and planned activities*** | |
| **Goal of the conducted research** |  |
| **Partners engaged into the research realization from other communities and external stakeholders** |  |
| **(Preliminary) findings of the conducted research (up to 200 words) *(please add the link if the research was published or attach any other document/presentation)*** |  |
| **What are the next steps? Please lay out activities that will be funded through this grant and expected results *(up to 300 words)*** |  |
| **Target audiences** |  |
| ***Financial Management, Organizational capacity******(for the Initiative group this section should be completed by FA)*** | |
| **Please provide summary information, answer the questions below:**   * *Do you have an accountant, financial manager?* * *Do you have an accountant system? Provide the title.* * *Do you have an experience in implementing grants over the past three years? (please provide name of donor and grant amount in USD)* |  |
| **Please confirm that there are no any restrictions in receiving funds from EU to the bank account in USD** |  |
| **Please confirm that proposed activities will start on time and there are no any restrictions in national legislation which can influence timeframe of the project or project realization itself (such as state registration of the grant funds, etc.)** |  |
| **Please provide summary budget in USD. Budget limit – 1750 USD** | Provide a lumpsumm for necessary cost input (chose applicable points):   1. Consultancy fee 2. Travel related costs (travel, accommodation, etc.) 3. Meeting related costs (rent of venue, meals, travel, accommodation) 4. Communication costs (printing, video, promo materials) 5. Other costs (please provide summary description) |
| **Annex 1 – organization registration document** | Yes/no |
| **Annex 2 – Memorandum of cooperation (in case of working through financial agent)** | Yes/no |
| **Date** |  |
| **Name and signature** |  |

**!!! Please, note that EHRA will sign an agreement with legally registered organisation only. EHRA will not be able to provide funds to individuals.**