## Grant Assistance for Grassroots Human Security Projects (GAGP Program)

## Application Form

|  |  |
| --- | --- |
| **Name of Organization (in English):** |  |
| **Name of Organization (in Arabic):**  |  |
| **Street Address** |  |
| **Mailing Address** |  |
| **Telephone Number** |  |
| **Nature of Organization** | **[ ]** NGO (Registration no. )[ ] School or Research Institute[ ] Hospital or Other medical institution[ ] Local Government |
| **Year of Establishment** |  |
| **Fields of Activities** |  |
| **Representative of Organization** | **Name Position title** |
| **Telephone number Mobile number**  |
| **Email Address** |
| **Contact Person** | **Name Position title** |
| **Telephone number Mobile number**  |
| **Email Address** |

|  |  |
| --- | --- |
| **Title of the Project** |  |
| **Project site location** |  |
| **Targeted beneficiaries** |  |
| **Estimated number of beneficiaries** |  |

**Project Justification** Please state briefly the current situations and needs, which shall be supported by statistics or data, in order to emphasize the importance of the project.

**Project Outline**

|  |  |  |
| --- | --- | --- |
| **Narrative Summary** | **Verifiable indicators** |  |
| **Overall Goal** |  |  |
| **Project Objective(s)** |  |  |
| **Outputs** | **Verifiable indicators** | **Activities** | **Budget** (in EGP) | **Financial source** |
| 1. |  | 1.1 |  |  |
| 1.2 |  |  |
| 1.3 |  |  |
| 1.4 |  |  |
| 1.5 |  |  |
| 1.6 |  |  |
| 2. |  | 2.1 |  |  |
| 2.2 |  |  |
| 2.3 |  |  |
| 2.4 |  |  |
| 2.5 |  |  |
| 2.6 |  |  |
| 3. |  | 3.1 |  |  |
| 3.2 |  |  |
| 3.3 |  |  |
| 3.4 |  |  |
| 3.5 |  |  |
| 3.6 |  |  |
| 4. |  | 4.1 |  |  |
| 4.2 |  |  |
| 4.3 |  |  |
| 4.4 |  |  |
| 4.5 |  |  |
| 4.6 |  |  |

**Time Plan**

|  |  |
| --- | --- |
| **Activities** | **Months** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | **19** | **20** |
| 1.1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**List of items to be funded by GAGP programme**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Items** | **Quantity** | **Cost per unit (without 10 % sales tax)** | **Total cost** | **Organization’s coverage** |
| **10 % sales tax** | **Delivery/ Installation costs** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Please use this space to add any information.**