

MICROFINANCING FORM

First page (parts I-III) may not exceed 1 page in length.

PROJECT PROPOSAL

Name of applicant:

Name of project:

Project manager

Name:

Position:

Telephone:

E-mail:

I. DETAILS OF PROJECT

1.1 Intended start of project (date)		Intended completion of project (date)	
1.2 Partner country of scholarship programme		Other target country (please specify)	
Afghanistan	Ukraine		
Georgia	Moldova		
Belarus			

II. MASTER BUDGET OF PROJECT

Financing of project	Amount (EUR, incl. VAT)	% of eligible expenditure of project
Total cost of project		
Grant applied for		
Self-financing		
Co-financing (if any)		

III. ABSTRACT

3.1 Abstract in Estonian (up to 8 lines)

3.2 Abstract in English (up to 8 lines)

IV. DESCRIPTION OF PROJECT

4.1 Project background *(Describe the origins of the project idea. Is the project part of wider co-operation between project partners in the target country? Or is it intended to initiate wider co-operation? Or is it a stand-alone project?)*

4.2 Link with the Strategy for Estonian Development Co-operation and Humanitarian Aid

Education		Peace and stability		Economic development		Informing the public and global education	
Health care		Development of democracy and rule of law		Environmentally friendly development			

4.3 Link with achievement of general goals of development co-operation

	Yes	Somewhat	No	Explanation
Does the project contribute to improving the situation of women and promoting gender equality?				
Does the project contribute to improving the environment and/or raising awareness of environmental issues?				
Does the project contribute to introduction of ICT solutions?				

4.4 Link with development plan or other strategic plan of target country

4.5 Describe the needs and problems of target country, the project will solve

4.6 Who are direct and indirect beneficiaries of the project? What is the estimated number of them? **(NB!** by gender (M /W/ +) and age group (0-17, 18-29, 30-59, 60+))

4.7 How are direct beneficiaries involved in the project? *(how are they notified, how are they included in project planning and implementation of project activities)*

4.8 Objectives and impact of the project

4.9 Summary of project activities *(indicate the key stages and their approximate start and end dates)*

No.	Implementation period	Activity <i>(must be consistent with activities indicated in budget)</i>	Description of content of activity	Result <i>(measurable results achieved through the activity ¹)</i>

¹, e.g. number of direct beneficiaries **NB!** by gender (M /W/ +) and age group (0-17, 18-29, 30-59, 60+), number of beneficiary institutions (education, state, health, etc.), number of reforms implemented and / or practices implemented, number of trainings / workshops / events organized

4.10 Which risks could affect achievement of project goals? How does the applicant intend to mitigate those risks? What are the respective risk levels? (link to the results in point 4.8)

Risks of project implementation	Mitigating measure(s)	High	Moderate	Low

4.11 Sustainability of the project (How do you intend to increase the long-term impact of the project? Describe agreements with project partners (institutions) for continuing the project activities or for using the project results after completion of the development co-operation project and Estonian financing.)

--

4.12 Project communication plan (How will be public and wider target groups informed about the project activities and outcome? What kind of very concrete communication activities are planned?)

--

V. CO-OPERATION PARTNERS

5.1 The list of co-operation partners (if any), contact details, how are they involved in the project

--

5.2 Criteria, how and why these particular co-operation partners have been chosen?

--

5.3 Previous co-operation with your partner

--

VI. PROJECT MANAGEMENT AND CONTROL MECHANISM

6.1 How are the project control mechanisms being organised? (Describe the systems in your organisations and between your organisation and partner organisations, that will support monitoring, control and reporting – whose responsibilities, how often? How do you collect any data needed for reporting and monitoring?)

--

6.2 How is the project book-keeping and auditing organised?

--

VII. OTHER ESSENTIAL INFORMATION

7.1 Indicate other information relevant to the assessment of the project (training plan; brief description or program of a seminar/event; structure or table of contents of the printed material to be compiled, etc.).

--

7.2 If the project or individual project activities are co-financed by other state budget funds, European Union funds or other foreign aid funds, indicate the relevant information.

Amount (EUR)	Financier	Activities financed	Status of financing (granted, pending approval)

VIII CHECKLIST

The checklist enables an applicant to check whether the project proposal conforms to requirements and whether the requisite documents have been appended to the project proposal.

An applicant must submit the project proposal electronically and provide it with a digital signature, or on paper and sign it in handwriting and provide an electronic copy.

Yes / No / N/A	Checklist
	The project proposal has been completed in full and in accordance with formal requirements.
	The project proposal has all the applicable annexes.
	The budget of the project is set out in Part 2 of the form. If necessary, the applicant must add an explanatory letter to the budget, clarifying and justifying the types of expenditure included in the budget.
	Other information relevant to the assessment of the project is set out in the project proposal.

The following has been appended to the project proposal:

Yes / No / N/A	Annexes
	A written confirmation or a co-operation agreement signed by the applicant and all project partners, or an unattested copy thereof, indicating the allocation of activities and costs between the participants in the project
	A power of attorney if the legal representative of the applicant is acting under mandate
	A list of experts participating in the project, and their CVs

NOTE! Last page (parts VII-IX) to be submitted on a separate page!

IX. CONFIRMATION OF PROJECT PROPOSAL

I hereby confirm the accuracy of all the data and documents submitted and declare that I will enable these to be verified.

I confirm, that I will answer any and all questions of the ministry concerning the project proposal and declare that I will enable the ministry to verify the conformity of the project proposal and the applicant to requirements.

I confirm, that an applicant may not be represented by a person who has been punished for an economic offence, official misconduct, offence against property or offence against public trust, and information concerning punishment has not been expunged from the punishment register pursuant to the Punishment Register Act.

I confirm, that our employees are prohibited from offering, promising, giving, requesting, accepting or agreeing to receive bribe of any kind in any form, directly or indirectly; prohibited from making facilitation or "grease" payments; we attest our commitment to fair, transparent and efficient use of the financial support allocated by the Ministry of Foreign Affairs of Estonia; in case of misconduct of these principles, the Ministry of Foreign Affairs of Estonia will be immediately informed.

An applicant being a legal person in private law confirms that:

- no liquidation proceeding has been initiated and no bankruptcy order has been issued with respect to the applicant or a person controlling the applicant;
- the applicant has no arrears of state taxes or there is an agreement on payment of the tax arrears in instalments, in which case the instalments of tax arrears have been paid in accordance with the agreed timetable; and
- if the applicant has previously received any assistance from state budget funds, European Union funds or other foreign aid funds, which were subject to repayment, the repayments have been made when due and in the required amount.

Method of notification of decisions relating to the processing of the project proposal	by e-mail		by post	
Name of representative of applicant	Signature	Date		

X. DETAILS OF APPLICANT

Name of applicant			
		Governmental authority or a body administered by a governmental authority	
Local government authority or a body administered by a local government authority		Non-profit organisation	
Foundation		County-level or national union of local government authorities	
Company		Other legal person	
Postal address of applicant			
Telephone	Fax	E-mail	Website
Name of bank and current account number			
Representative of applicant			
Name:			
Position:			
Telephone:			
E-mail:			
Basis for representation:			