**PROJECT PROPOSAL**

**APPLICANT DETAILS**

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| **Project Leader First Name** |  |
| **Project Leader Last Name** |  |
| **Project Leader Email** |  |
| **Project Leader Phone number** |  |

Are you an alumn/a of the German Marshall Fund?

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| **Yes** |  |
| **No** |  |

If yes, please indicate fellowship program

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If you apply on behalf on an organization, please provide the following information:

|  |  |
| --- | --- |
| **Organization name** |  |
| **Organization address** |  |
| **Organization website** |  |
| **Organization phone number** |  |
| **Organization registration number** |  |
| **Name of the organization’s director** |  |
| **Email of the organization’s director** |  |
| **Phone number of the organization’s director** |  |

Have you or your organization received a grant from the German Marshall Fund before? Please check the appropriate box.

|  |  |
| --- | --- |
| **Yes** |  |
| **No** |  |

If yes, please indicate:

|  |  |
| --- | --- |
| **Date** |  |
| **Amount** |  |
| **Project Title** |  |
| **Project Location** |  |

How did you hear about this call for projects? Please check the appropriate box.

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| **GMF website** |  |
| **Social media** |  |
| **Other** |  |

Which of the overarching themes of this call does the project address? Please check all the appropriate boxes.

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| **Trade, investment and an economy that works for all;** |  |
| **Data privacy and digitalization** |  |
| **Fundamental rights and immigration** |  |
| **Security and defense**  |  |
| **Learning and skills for a digital economy**  |  |
| **Tackling the climate crisis through sustainable urban transportation**  |  |
| **Combatting organized crime and terrorism** |  |

**PROJECT DESCRIPTION**

**Project Summary** ( max 200 words)

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**Outcomes**: What measurable change of behavior, practices and/ or knowledge do you want to achieve with this project? We recommend you identify no more than 3 outcomes.

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**Activities**: Please describe below the activities your project will include.

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**Timeframe of Activities:** Please give the timeframe for the activities above by indicating the month these activities will take place.

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| --- | --- | --- | --- | --- | --- |
| **Activity name** | **Month 1** | **Month 2** | **Month 3** | **Month 4** | **Month 5** |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
| *add as many rows as needed* |  |  |  |  |  |

**Target groups:** Please describe below the target groups and indicate the activity through which they will be engaged.

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**Beneficiaries**: Please indicate below who are the direct and indirect beneficiaries of your project.

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**Partnerships.** If you are implementing this project in partnership with another organization(s)/institution(s), please provide the name of the organization, address, city, state, person of contact, mobile, email. Please describe the organization’s role in the project.

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**Publicity.** What methods and tools will you use to inform the target audience and the general public about the progress of the project and its results?

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**Risk and risk management**. Please describe any potential risks involved in implementing your project and what is being done to minimize these risks.

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**Budget:** Please provide a breakdown of your project budget by activity as well as any reference to additional funding or in-kind contributions.

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**Other resources:** Please outline if you plan to leverage other resource, in-kind, financial or otherwise to implement your project**.**

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