**APPLICATION FORM[[1]](#footnote-2)**

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| --- | --- |
| **Organization name in English** |  |
| **Project** **title** |  |
| **Project location**  *(Country/countries and city/cities)* |  |
| **Anticipated start date of project** *(month/day/year)* |  |
| **Anticipated end date of project** *(month/day/year)* |  |
| **Overall budget of the project** | € |
| **Funding requested from Black Sea Trust** | € |

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| **Organization**  **Legal Address:**  **If relocated, please indicate relocation address:**  **Phone:**  **Website:**  **Social Media:** | | | **Legal representative of the organization**  **Name:**  **Title:**  **Phone:**  **Mobile:**  **Email:** | | |
| Other members of the project team (names, positions, email): | | | **Project Manager**  **Name:**  **Title:**  **Phone:**  **Mobile:**  **Email:** | | |
| Please provide a brief **description** of the project in 6 lines or less: | | | | | |
| **Have you applied to the German Marshall Fund before?** | No | If yes, have you been successful? | | No | If yes, please mention contract number(s) below: |
| Yes | Yes |
| *GMF Grants:* | | | | | |
| **Have you applied to the European Commission before?** | No | If yes, have you been successful? | | No | If yes, please mention the details below: |
| Yes |  | | Yes |  |
| *Contracting authority and date:* | | *Amount:* | | *Timeline:* | |

**1. SUMMARY**

***PROJECT OVERVIEW***

**Background**. What is the issue or problem your project will address? What are the causes of the problem, and what are its effects? Please explain only the context that is directly related to your project using minimum half a page and maximum one page.

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**Relevance**. Why is it important to solve this problem or issue? How will the project provide the desired solutions? Please explain the issue or problem that is directly related to your project using minimum half a page and maximum one page.

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**Innovation.** Please detail what makes your project innovative.

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**Partnerships**. If you are implementing this project in partnership with other organization(s) or institution(s), please provide: Name of the organization, country, and details of pontact person, including phone, mobile, and email. Describe the organization’s role in the project and specify if this partnership is formal or informal. In case you have formal partner(s) within your project, please send us a copy of the partnership agreement between your organization and your formal partner(s).

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| **Organization details** | **Contact Person** | **Role of organization in project activities[[2]](#footnote-3)** | **Type of partnership** *(formal/informal)* |
| Full name:  Address:  Phone number:  Webpage/ social media channel: | Full Name:  Position:  Phone:  Mobile:  Email: |  |  |
| *<delete/add as necessary>* |  |  |  |

Please note that the formal partnership letter should detail key personnel, activities, deliverables, indicators, and budget.

**Risk and risk management[[3]](#footnote-4)**. Please respond to the below questions by marking “yes” or “no” and offering the requested details, where applicable.

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| Potential Risk**[[4]](#footnote-5)** | Probability of occurrence**[[5]](#footnote-6)** | Potential impact on project**[[6]](#footnote-7)** | Measures to minimize the probability of occurrence and/or the potential impact on project: |
| *<add as necessary>* |  |  |  |
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| --- | --- | --- |
| Does your organization have a written **conflict of interest policy?** | YES | NO |
| If yes, please attach it to your email and provide a brief overview below. (5-7 lines) | | |
|  | | |
| Please list the main organizations, institutions, and companies in which your organizational staff and board have been active in, either as staff or leadership, over the last 24 months. | | |
|  | | |
| Has your organization completed an **audit** during the past 24 months? | YES | NO |
| If yes, please offer a brief overview below. (5-7 lines). | | |
|  | | |
| Does your organization have an **operational accounting system**? | YES | NO |
| If yes, please offer a brief overview below. (5-7 lines)  Please also provide information regarding management of petty cash. | | |
|  | | |
| Does your organization have an **operational procurement system**? | YES | NO |
| If yes, please offer a brief overview below. (5-7 lines) | | |
|  | | |

Which **Program theme** does the project address? Please mark **only one** program theme that corresponds to the issue your project is addressing.

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| --- | --- |
|  | **Yes** |
| **Supporting key democracy watchdogs in the Wider Black Sea Region** |  |
| **Bolstering the information space in the Wider Black Sea Region** |  |
| **Addressing critical policy issues in the Wider Black Sea Region** |  |
| **Seeking and supporting third-party proposals implemented in partnership, bridging the Wider Black Sea region and EU** |  |
| **Seeking and supporting third-party proposals of exchanges, sharing of expertise, and success stories between the Wider Black Sea region and EU** |  |

Please explain your choice below.

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***OUTREACH***

**Visibility.**  Ensuring proper visibility of the EU’s financial support helps build accountability and transparency on the use of EU funds to taxpayers and citizens of partner countries. All recipients of EU funding have a general obligation to acknowledge the origin and ensure the visibility of any EU funding received. Please review the [***Communicating and raising EU visibility: Guidance for external actions***](https://euneighbourseast.eu/wp-content/uploads/2022/08/communicating-and-raising-eu-visibility-guidance-for-external-actions-july-2022_0.pdf)and answer the questions below:

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| --- | --- | --- |
| **Do you have past experiences in implementing EU visibility requirements?** | YES | NO |
| If yes, please briefly describe your experience and give examples. | | |
|  | | |
| **Does this proposal require a waiver for EU visibility requirements?** | YES | NO |
| If yes, please explain why. | | |
|  | | |

Please describe, in one page maximum, your communication plan.

***TARGET GROUPS AND ACTIVITIES***

Please indicate the intended **target groups** for this project. This should reflect the **primary target groups** of the project only (for example, if your project primarily targets journalists but some of these are women, fill out only “Journalists” and not “Women”). For each target group, please indicate how many are female or male, and the number of participants per country.

*Please add or delete in the “Country” columns above as needed to reflect those countries where target groups are located. You may also add additional rows to the “Target Groups” column. Examples is provided below in blue:*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Target Groups** | **Estimated Number** | **Age group**[[7]](#footnote-8) | **Out of which:** | | **Country\*** | | | |
| **Female** | **Male** | **Ukraine** | **Romania** | **Moldova** | *delete/ add as necessary* |
| Internally displaced people (IDPs) |  |  |  |  |  |  |  |  |
| Refugees |  |  |  |  |  |  |  |  |
| Academia | 100 | 35-44 | 40 | 60 | 30 | 0 | 70 |  |
| Bloggers | 25 | 19-24 | 15 | 10 | 25 | 0 | 0 |  |
| Business representatives |  |  |  |  |  |  |  |  |
| Citizens |  |  |  |  |  |  |  |  |
| Civic leaders |  |  |  |  |  |  |  |  |
| Experts/Think-tankers |  |  |  |  |  |  |  |  |
| International organizations representatives |  |  |  |  |  |  |  |  |
| Journalists |  |  |  |  |  |  |  |  |
| Lawyers |  |  |  |  |  |  |  |  |
| LGBTQ |  |  |  |  |  |  |  |  |
| Minorities |  |  |  |  |  |  |  |  |
| Public officials |  |  |  |  |  |  |  |  |
| Youth |  |  |  |  |  |  |  |  |
| Women |  |  | N/A | N/A |  |  |  |  |
| *delete/add as necessary* |  |  |  |  |  |  |  |  |
| **Project Total:** | 125 | N/A | 55 | 70 | 55 | 0 | 70 |  |

Please indicate the **types of activities** that are included in your project, as well as the estimated number of each activity type that you plan to implement. For each activity, also mark the following: 1) The number of occurrences which are local, national, or regional; 2) The target group(s) involved (this should correspond to the target group categories indicated above); and 3) The number of participants per target group (indicate the number of people for each target group listed).

*Please add or delete “Activity” columns as needed to reflect different activity types. An example is provided below:*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Activity** | **Estimated Number** | **Implementation Scope** | | | **Target Group(s)** | **Number of participants per target group** |
| **Local** | **National** | **Regional** |
| Emergency support to IDPs |  |  |  |  |  |  |
| Support to Refugees |  |  |  |  |  |  |
| Artistic and Cultural Events | 5 | 1 | 4 | 0 | Academia  Bloggers | 100  25 |
| Conference/ Forum |  |  |  |  |  |  |
| Debate/Round Table |  |  |  |  |  |  |
| Focus groups |  |  |  |  |  |  |
| Mobile app |  |  |  |  |  |  |
| Publications |  |  |  |  |  |  |
| Media products |  |  |  |  |  |  |
| Study visit |  |  |  |  |  |  |
| Social media campaign |  |  |  |  | *Fill in outreach section only* | |
| Survey |  |  |  |  |  |  |
| Training/Seminar/ Workshop/Webinar |  |  |  |  |  |  |
| TV Show |  |  |  |  | *Fill in outreach section only* | |
| Website *(i.e. website traffic / no of unique visitors)* |  |  |  |  | *Fill in outreach section only* | |
| *<delete/ add as necessary>* |  |  |  |  |  |  |

Please list and describe, in 1-2 pages, each anticipated activity**.**

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**Timeframe of Activities**. Please provide the timeframe for the activities above by marking an “x” under the month these activities will take place. Activities should be listed in chronological order; month 1 signifies the first month of the project. Please note that the “activity type” listed should correspond to the categories indicated above:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Activity Type** | **Month** | | | | | |
| **1** | **2** | **3** | **4** | **5** | **6** |
|  |  |  |  |  |  |  |  |
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|  | *<delete/add as necessary>* |  |  |  |  |  |  |

**2. EXPECTED RESULTS**

**Program Indicators.** Please specify below to which degree will your program contribute to the following program indicators Please fill in all empty cells. Indicators that do not reflect your project’s results should be marked with N/A.

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| --- | --- | --- |
| **Indicators** | **Reached**  **(numbers)** | **Briefly described how this indicator was reached during your project implementation, by referencing specific activities** |
| Number of **policy papers, studies, recommendations, or opinion pieces** developed |  |  |
| Number of **CSOs involved in addressing the consequences** of the war in Ukraine |  |  |
| Number of **refugees and IDPs** benefiting from services |  |  |
| Number of **regional trainings** |  |  |
| Number of **media products developed** |  |  |
| Number of **major policy fora** with the Black Sea region on agenda |  |  |
| Number of **CSOs that developed new communication tools to address illiberal actions of decision-makers** on short and medium term |  |  |
| Number of **citizens** from the Wider Black Sea region **engaged in various watchdog activities, media literacy programs, or exchanges of experience** |  |  |
| Number of **new initiatives** arising from networks established across countries that **address critical policy issues** in the Wider Black Sea region |  |  |
| Number of **fora promoting exchanges and cooperation supported** |  |  |
| Number of **study visits/exchanges** |  |  |
| Number of **regional convenings promoting exchange** between civil society groups in the Wider Black Sea region and in the EU Member States |  |  |
| Number of **activists involved in Wider Black Sea regional initiatives**, who joined EU networks |  |  |

**3. SUSTAINABILITY**

How will the achieved project outcomes be preserved, reproduced, and further developed after the Black Sea Trust support ends? Please describe where applicable:

**Synergies.** Please mention and describe links with similar initiatives.

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**Financial sustainability.** Financing follow-up activities, sources of funding.

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**Institutional sustainability**. What structures would allow for a continuation of the project?

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**Policy-level sustainability.** Will it lead to improved codes of conduct, methods, legislation, etc.?

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**4. PROJECT BUDGET**

**Budget spending rationale**. Include a short narrative of the main budget categories from the Budget form.

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**Other funding.**

Have you applied for other funding for this project? If so, please specify the amount and the funding source.

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Have you received (or received official confirmation of) other funding (financial or in-kind) for this project? If so, please specify the amount and the funding source.

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If your organization has its own resources for this project, either cash or in-kind (technical equipment, space, volunteers), please explain what these resources are.

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**5. ORGANIZATION DESCRIPTION**

|  |  |
| --- | --- |
| Country where registered |  |
| Registration number |  |
| Date of registration |  |
| Registered as: (e.g., foundation, association, governmental organization, etc.) |  |

**Mission**. What is the mission of your organization? For example, if you were asked to describe why your organization exists, what would you say?

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**Structure**. What is the structure of your organization? Who makes the decisions (Managing Board, Director/Coordinator...)? How many people work in your organization? Are they employed, paid by project, or volunteers?

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**Activity portfolio**. Briefly describe the projects your organization has implemented during the last two years and the results of these projects. Please mention both quantitative results (for example, the number of citizens engaged) and qualitative results (for example, X city hall consults on a regular basis with citizens and civil society organizations regarding Y issue).

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| --- | --- | --- | --- | --- |
| **Project title** | **Timeline** | **Location(s)** | **Donor and**  **award amount** | **Key Achievements** |
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|  |  |  |  |  |
| *<add as necessary>* |  |  |  |  |

Please describe your **experience** implementing similar projects to the proposal.

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If you have received funding from the Black Sea Trust before, please describe in 2–3 paragraphs the **impact of the previous grant(s). If the organization’s name has changed**, please provide previous name under which BST funding was received.

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**Funding.** What was the total income and expenditure of your organization in the previous financial year?

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| --- | --- |
| Total income in the previous financial year: |  |
| Total expenditure in previous financial year: |  |

Please list your sources of income for the previous two years including names of all donors and amounts.

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**6. REFERENCES**

Please provide contact information of a funder **and** a partner organization you worked with during the past two years.

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| --- | --- |
| Name of Funder:  Phone:  Website: | Full Name of Your Point of Contact:  Title:  Mobile:  Email: |
| Name of Partner Organization:  City, Country:  Phone:  Website:  Social media: | Full Name of Your Point of Contact:  Title:  Mobile:  Email: |

1. **All fields are mandatory**. Use “None” or “Not applicable” where appropriate. Empty or incomplete applications will not be reviewed. [↑](#footnote-ref-2)
2. Please indicate the Activity Numbers the partner is directly involved, as described in the **Timeframe** section [↑](#footnote-ref-3)
3. An uncertain event or set of events that, should it occur, it will negatively affect the achievement of the objectives. [↑](#footnote-ref-4)
4. Please make sure you list internal and external risks associated with each objective. [↑](#footnote-ref-5)
5. Indicate value: 1 – Improbable; 2 – Possible; 3 – Probable. [↑](#footnote-ref-6)
6. Indicate value: 1 – Low impact; 2 – Medium impact; 3 – Major impact. [↑](#footnote-ref-7)
7. Under 18; 19 – 24; 25 – 44; 44 – 64; over 65 [↑](#footnote-ref-8)