

For official use only

**APPLICATION FORM
FOR JAPAN'S GRANT ASSISTANCE
FOR GRASSROOTS HUMAN SECURITY PROJECTS**

PLEASE TYPE OR PRINT

1. Applicant

(1) Name: _____

(2) Address: _____

(3) Telephone number: () _____
Fax number: () _____
E-mail: _____

(4) Responsible individual:

Name: _____
Position: _____
ID Number: _____

(5) Contact person (if different to Section (4)):

Name: _____ Title: _____
Position: _____
Telephone number () _____
E-mail: _____

(5) Has your organization received any financial/technical assistance from foreign governments, international organizations or NGOs? If yes, please describe the content of the assistance:

(6) Please answer the following questions according to the nature of your organization.

(a) Non-Governmental Organizations (NGO):

(i) Year of establishment: _____

(ii) Number of staffs:

(iii) Country of activities other than your country (if any):

(iv) Purpose of establishment:

(v) Main activities:

(b) School or Research Institute:

(i) Year of establishment: _____

(ii) Number of teachers (Researchers):

(iii) Number of students: _____

(iv) Subject of Research: _____

(c) Hospital or other Medical Institute

(i) Year of establishment: _____

(ii) Number of doctors: _____

(iii) Number of nurses: _____

(iv) Number of beds: _____

(v) Medical service given in your hospital/institutions: _____

(d) Local Government:

(i) Population: _____

(ii) Budget size (current fiscal year): _____

(iii) Current situation and problems in the area under the jurisdiction of the applicant: _____

(e) Governmental Institute (Department)

(i) Number of Personnel: _____

(ii) Authorities and Duties of the Applicant:

If there is certain document or booklet introducing your organization, please attach to this form.

2. Project

(1) Title of the project:

(2) Project site (including the distance from nearest well-known town)

* Ownership of the project site (circle one):

Owner, tenant, other (specify): _____

IF YOU ARE NOT THE OWNER, kindly explain the legal relationship with the land owner:

(3) Objectives of the Project:

(4) Outline of the Project:

(5) Estimated population that would be benefited by the Project

(6) Expected Effects of the Project:

(Please describe the relationship between the Project and the objectives, and how the Project would contribute to the accomplishment of the objectives)

(7) Estimate cost for the entire project:

Funding for which you request assistance from the Japanese Government:

Please attach breakdown of the goods/services which you intend to purchase by the GGP fund as well as the quotes obtained for the cost of the equipment/material.

(8) If you are applying the GGP Program for a part of the project, how will you finance the other costs?

(9) Duration of the Project:

From: _____ to _____
(month, year) (month, year)

Please attach the following documents to this application form:

(If they are not available, please provide the equivalent information with our embassy.)

- Map(s) indicating the Project site(s)
- Design specifications of the Project
- Written estimates of the goods/services from THREE different suppliers
- Documents or booklets with information concerning the Applicant (if any)
- Photographs of the Project site(s)

Date: _____

Name: _____

Title: _____

Signature: _____