TDRF GRANT PROPOSAL

[Name of the Project]

Submitted By [Name of the Organization]

**EXECUTIVE SUMMARY**

Organization Profile:

|  |  |
| --- | --- |
| Official Name of Organization |  |
| Primary Email Address |  |
| Primary Phone Number |  |
| Website |  |
| Social Media Handles |  |
| Grant Contact Person (e.g., President, Director, Chief Executive or Operating Officer) |  |

Organization Founder(s) and Leadership:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Professional Title | Qualifications | Email Address | Role in Organization |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Project Profile:

|  |  |
| --- | --- |
| Project Title |  |
| Project Location |  |
| Requested Funding Amount (in USD) |  |
| Project Timeline (start and end date) |  |
| Estimated Number of Beneficiaries |  |

Project Leader(s) (Primary Point of Contact):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Professional Title | Qualifications | Email Address | Role on Project |
|  |  |  |  |  |
|  |  |  |  |  |

Project Team Member(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Professional Title | Qualifications | Email Address | Role on Project |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please identify the sustainable development goal(s) addressed by the proposed project:

*[ ]  Disaster Relief*  *[ ]  Food Security*  [ ]  *Education* *[ ]  Health* [ ]  *Economic well-being*

Please provide a brief summary statement of the project that highlights the important aspects proposal (100 words or less):

|  |
| --- |
| Insert descriptive text |

**ORGANIZATIONAL BACKGROUND**

Organization Type:*[ ]  Non-governmental* *[ ]  Community-based* *[ ]  Faith-based* *[ ]  Academic*

*[ ]  Other, please specify\_\_\_\_\_\_\_\_\_\_*

Is the organization a legally established nonprofit organization and currently recognized by the Internal Revenue Service (or similar government authorizing body in the country you operate) as a public charity?

[ ]  Yes (please attach/upload documentation of registration status to proposal application submission)

[ ]  No (ineligible for TDRF funding, please email admin@tdrfund.org for questions)

Establishment Date: mm/dd/yyyy

Please provide a description of the organization (500 words or less) addressing the following areas:

* Organizational history and description of project team, including the leadership structure and responsibilities of the project team
* Any specialty areas
* Relevant partners and networks on the ground for project implementation
* Past projects, outcomes and impact, as well as any ongoing projects
	+ Please include any links to websites, social media pages, etc.
	+ *If your organization has an Annual Report or similar document, please include as a separate attachment with application*

|  |
| --- |
| Insert descriptive text  |

**PROJECT NARRATIVE**

Please provide a detailed description of the proposed project activities (500 - 1000 words) addressing the following areas:

* List the goals and specific objectives (measurable outcomes), and timeline of the project
* Explain the sustainable development goal or problem being addressed by project
* Describe the location where the proposed project will be conducted and why
* Summarize relevant information on location, community and resources available
* Identify the potential impact(s) of the proposed project

|  |
| --- |
| Insert descriptive text |

**BENEFICIARIES**

Please describe the population that the proposed project would serve (200-300 words):

* Who are the beneficiaries? Describe the beneficiaries.
* How will you reach out to them?

|  |
| --- |
| Insert descriptive text |

**TIMELINE**

Please describe the proposed project timeline below. Please summarize using the table below and add more rows for any additional activities, deliverable of key milestones.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Description of Activity  | Deliverable(s) | START DATE (mm/dd/yyyy) | END DATE (mm/dd/yyyy) | Duration (e.g., days or weeks) |
| Planning Phase |  |   |   |  |
|  |  |   |   |  |
|  |  |   |   |  |
| Implementation Phase |  |   |   |  |
|  |  |  |  |  |
|  |  |   |   |  |
| Monitoring Phase |  |   |   |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Dissemination Phase |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**BUDGET**

You must have a legal bank account and provide TDRF that account (in the country you are registered in or where the project will operate) for the organization through which the nonprofit conducts all its transactions and in which it keeps all of its money deposited or withdrawn at any time. TDRF will not disperse funds to personal bank accounts.

Please provide the following information as confirmation that your organization has an institutional bank account:

|  |  |
| --- | --- |
| Bank Name |  |
| Branch Name |  |
| Account Number |  |
| Bank Website |  |
| Bank Phone Number |  |
| Bank Email  |  |

Please provide a detailed budget of all expenses and justification using the table below:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Description** | **Unit**  | **No of Units** | **Cost per Unit (USD)** | **NGO Cost****(USD)** | **TDRF Cost****(USD)** | **Total Cost****(USD)** |
| *Please insert a separate row for each cost adding more rows as needed* | *Describe the nature of the unit (e.g., monthly salary for staff, rent per venue, printing costs per training material package, etc.)*  | *(e.g., if one unit per beneficiary and 30 beneficiaries, No of units=30)* |  | *Fill out only if the NGO contributes with its own resources to the project*  |  |  |
| **1** | **Personnel (project manager, community workers, trainer, other staff, etc.)** |
|   |   |   |   |   |   |  |
|   |   |   |   |   |   |  |
|   |   |   |   |   |   |  |
| **Sub-total** |  |  |  |
| **2** | **Operations / Maintenance (training, renting of a venue, transport, etc.)** |
|   |  |   |   |   |   |  |
|  |  |   |   |   |   |  |
|  |  |   |   |   |   |  |
|  | **Sub-total** |  |  |  |
| **3** | **Equipment and supplies (procurement/or renting of small equipment and supplies needed for the project activities, incl. goods, material, etc.)** |
|   |   |   |   |   |   |  |
|   |   |   |   |   |   |  |
|   |   |   |   |   |   |  |
| **Sub-total** |  |  |  |
| ***4*** | ***Administrative* (Travel, accommodations, internet, etc.)** |
|   |  |   |   |   |   |  |
|  |  |   |   |   |   |  |
|  |  |   |   |   |   |  |
|  | **Sub-total** |  |  |  |
|  | **Total** |  |  |  |
|   |   |   |   |   |   |   |   |   | *= grant amount* |  |

**MONITORING & EVALUATION**

Please described the proposed plan for project monitoring and evaluation by addressing the following areas (500 words or less):

* How progress will be evaluated throughout and at the end of the project
* Plan to disseminate results during the project period and after, with the internal team, TDRF, the target population, and any relevant stakeholders and partners

|  |
| --- |
| Insert descriptive text |

**REFERENCES**

You must provide letters of support from three professional references for your organization. The letters should address the following information (500 words or less):

* In what capacity did they work with your organization?
* What activities did your organization complete as part of the project or partnership?
* What were the dates and duration of the project or partnership?
* To what extent did your organization deliver on their activities and the quality of the work delivered?
* Are any reservations about working with this organization in the future?

Please list the references below and attach/upload the letters to the proposal application submission.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Professional Title | Qualifications | Email | Phone | Nature of Relationship to Organization |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |