**WADPN PROPOSAL TEMPLATE**

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| **Name of Organization** |  |
| **Email Address** |  |
| **Name of Contact person** |  |
| **Email address** |  |
| **Phone number** |  |
| **Project title** |  |
| **Project amount** |  |
| **Project duration** |  |
| **Project start date** |  |
| **Project end date** |  |
| **Project location** |  |

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| **PROJECT DESCRIPTION:** *Provide a brief summary of your project.* | | |
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| **PRIOR EXPERIENCE:** *briefly state your previous experience working on similar project* | | |
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| **CURRENT CONTEXT:** *provide an overview of the overall drug response environment in your country including the legal and regulatory framework.* | | |
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| **PROBLEM STATEMENT:** *what problem does this project seek to address* | | |
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| **APPROACH/STRATEGY:** *chronologically state how the project will address this problem you have identified and to which extent.* | | |
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| **PROJECT OBJECTIVES, ACTIVITIES AND EXPECTED OUTCOME:** what are the specific objectives of the project? | | |
| Overall objective |  | |
| Expected outcome |  | |
| **Specific objective 1** |  | |
| Activities |  | |
| **Outcome** |  | |
| Specific objective 2 |  | |
| Activities |  | |
| Outcome |  | |
| **Specific objective 3** |  | |
| Activities |  | |
| Outcome |  | |
| **Specific objective 4** |  | |
| Activities |  | |
| Outcome |  | |
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| **PERFORMANCE INDICATORS:** *(Please provide a list of indicators per activity that will be used to assess the progress and performance of the project, and the achievement of the expected results.)* | | |
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| **TARGET BENEFICIARIES:** *Who would benefit from this project? Please specify the communities, groups of people etc. that would benefit from this project)? Please indicate how they would benefit from this project.* | | |
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| **SUSTAINABILITY**: *If your proposal is approved, how does your organization intend to sustain this project after WADPN’s support*? *How does this fit in with your organization’s strategy and long-term plans?* | | |
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| **ORGANIZATIONAL INFORMATION AND PROJECT MANAGEMENT STRUCTURE:** *In this section, WADPN seeks to understand the objectives of your organization and its structures. The likelihood of your grant being considered lies very much with the information provided in this section. Please attach the following documents to your application: a) certificate of incorporation b) audited accounts c) management team, names and resumes of staff working on the project d) last annual or organization report if any.* | | |
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| **FINANCIAL INFORMATION AND MANAGEMENT**  Yearly budget of the organization:  Main funders:  Major projects and accomplishments:  How often does the organization produce audited financial statements?  Name of financial management system, (accounting system) if any?  What is the mechanism in place in your organization for tracking grant expenditures from donor funding? Is the organization able to keep separate records for each donor | | |
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| **PUBLIC IMAGE AND COMMUNICATIONS:** *Please provide the organization’s website, twitter, Facebook and other social media links, Do you have a dedicated communication staff and/or a communication strategy or plan* | | |
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| **Risks:** Please fill out the following risk matrix, providing up to 3 risks that your project will address, as well as descriptions of mitigation measures that you will take to reduce/eliminate these risks. Risks can be organizational, contextual, technical, internal/external, or relate to matters like resources, drug use, etc. | | |
| **Description of Risk** | | **Proposed Mitigation Measures** |
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