**APPLICATION FORM**

**Support - Small-Scale Advocacy Initiative for Equality and Gender Mainstreaming**

1. **Basic information about the organization**

Name of the organization: City of the organization:

Registration Number of the Organization: Fiscal Number:

Name of the responsible person: Year of establishment:

Telephone: Webpage (if any):

Project Title Project Duration

Target Group Beneficiaries:

E-mail:

1. **Background of the Organization**

*Write two to three paragraphs describing the mission of the organization, including the previous activities/projects:*

|  |  |
| --- | --- |
| **Description of the action***Objectives of the action* *Relevance of the action* |  |
| **Outcome***What do you want to achieve? This must be NO MORE than one sentence*  |  |

1. **Activities &**  **Results**

*Describe the activities that will be implemented in this project, as well as the implementation timeline:*

Activity 1:

Activity 2:

Activity 3:

Activity 4:

*(Add more if necessary)*

|  |  |
| --- | --- |
| **Outputs** *What will the project deliver?* |  |
| **Risks***Provide brief details of any serious risks to the success of the project and how these will be mitigated* |  |

1. **Location**

*Specify the location where the activities will be implemented. Mention the name of the cities/villages:*