**Annex 1 - Application form**

Note: The applicant(s) are required to fill this form in full. The information shall be stated clearly and briefly. Costs estimates to be converted in USD.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. INFORMATION ABOUT THE MAIN APPLICANT | | | | | | |
| * 1. Full name of applying entity | |  | | | | |
| * 1. Telephone, incl. cell phone | |  | | | | |
| * 1. E-mail | |  | | | | |
| * 1. Web-site (if applicable) | |  | | | | |
| * 1. Organization’s fiscal code | |  | | | | |
| * 1. Full name of the project coordinator, position | |  | | | | |
| * 1. Coordinator’s contact number (tel./cell) | |  | | | | |
| * 1. Coordinator’s e-mail | |  | | | | |
| * 1. Bank account number in MDL | |  | | | | |
| * 1. Bank code | |  | | | | |
| * 1. Bank name | |  | | | | |
| * 1. Bank address | |  | | | | |
| * 1. Full name and titles of authorized signatory person(s) | |  | | | | |
| * 1. Organization registration date as indicated in the certificate of registration. | |  | | | | |
| * 1. Total number of employees | |  | | | | |
| * 1. Describe the main areas of work of the applying entity in max. 800 characters | |  | | | | |
| * 1. Indicate the projects your entity has implemented over the past two years, specifying the project budget and donor organization (brief description of project goal and key results (max. 700 characters *per project*) | |  | | | | |
| 1. INFORMATION ABOUT THE CO-APPLICANT | | | | | | |
| * 1. Full name of co-applicant entity | |  | | | | |
| * 1. Full name of project coordinator of the co-applicant entity (position in the organisation) | |  | | | | |
| * 1. Coordinator’s contact number (tel./cell) | |  | | | | |
| * 1. Coordinator’s contact number e-mail | |  | | | | |
| * 1. Total number of employees | |  | | | | |
| * 1. Describe the main areas of work of the applying private entity in max. 800 characters | |  | | | | |
| * 1. Indicate the projects your entity has implemented over the past two years, specifying the project budget and donor organization (brief description of project’s goal and key results (max. 700 characters *per project*) | |  | | | | |
| 1. **PROJECT TITLE** (please formulate a sort title of the project, which may reflect the objective and beneficiaries)   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| 1. **Please define project main goal and objectives**   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| * 1. How will the project contribute to overcoming negative effects of COVID 19 and regional crisis caused by the war in Ukraine in the economic sector you represent? What difference will the project make for target MSMEs helping them build resilience to crises and creation or maintain jobs? How many businesses will benefit of the project? How does the project contribute to achieving the national and regional objectives on export promotion? Are stakeholders like, civil society organizations, local and central authorities and academia involved in project implementation? | | | (please respond in max 3,000 words to each of the bellow questions | | | |
| * 1. How will the proposed activities improve the institutional capacity of your organization in the terms of capacity development for MSMEs and service provision? Are the project’s interventions being fully in line with the applicant’s competency according to their statute? | | | … | | | |
| * 1. How many women entrepreneurs will develop their knowledge and business skills, strengthening leadership potential, through project activities? | | |  | | | |
| * 1. What is the confidence building nature of your proposal and what cross-river impact it will generate for the organization and it’s members after the project implementation? | | | … | | | |
| * 1. What is the exclusivity and innovation the project intervention? What is the spillover potential of the project? What activities indicate elements of innovation, digital, green transition? | | | … | | | |
| * 1. How will you assure the sustainability of the newly developed services after project closure? | | | … | | | |
| * 1. RISK ANALYSIS: | | | | | | |
| Indicate relevant risks to achieving the grant objectives and mitigation measures that will be taken. Risks include security, financial, operational, social, environmental, other risks.   |  |  |  | | --- | --- | --- | | Risk | Risk rating\* (High/Medium/ Low) | Mitigation measures | | To fill in | To fill in | To fill in | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   \*The risk rating is based on a reflection of the likelihood of the risk materializing and the consequence it will have if it does occur. | | | | | | |
| 1. PROJECT ACTIVITY PLAN   Describe project activities following a well-defined and clear logic and a time sequence, estimate efforts, in USD and specify the roles of each partner in the implementation. Activities to be delegated to 3rd part shall be mentioned (add rows if necessary) | | | | | | |
| Nr. | Area of intervention and the specific activity\* | | | Implementation term  (m/y) | Estimated cost of the activity, (USD) | Responsible (main applicant/co-applicant) |
|  | Policy support | | |  |  |  |
| *1.1.* | Ex. Development of the analyses of the impact of regional crisis on XY sector | | |  |  |  |
| *1.2* | Ex. Organization of 2 capacity building trainings for business support organizations | | |  |  |  |
|  |  | | |  |  |  |
|  | … | | |  |  |  |
| *\*each activity includes a short description, number of beneficiaries, involved partners, dates, location, targeted results*   1. PERFORMANCE TARGETS   State the indicators for measuring results that will be achieved using the grant. At least one indicator is required. More can be used if useful to more fully measure the results that are expected to be achieved:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Indicator(s) | Data source | Baseline | Milestones | | | | | Final Target | | Q2  2023 | Q3 2023 | Q4 2023 | Q1 2024 | … | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | |