# FULL PROPOSAL

# Application for financial support

*Answer all questions as precisely and appropriately as possible and enclose all necessary documents. Please*

* *answer questions 1 and 2 on a maximum of one page each*
* *answer questions 3 to 9 and 11 to 13 together on a maximum of six pages*
* *there is no restriction for budget information (question 10) and CVs (question 14)*

**The proposal must be signed by the Chairperson of the club/association and by the project managers.**

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| 1. **Cover page A** | Briefly summarise the overall project. Maximum 1 page of A4 |

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| 1. **Cover page B** | Describe the area to be supported by the DEAR Foundation-Solidarité Suisse Maximum 1 page of A4 |

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| 1. **Initial details** | | |
| **Project/job title** |  | |
| **Project topic** | What is it about? | |
| **Substantive project objective** | Form and nature of the results | |
| **Field and discipline** |  | |
| **Budget for the overall project** |  | |
| **Project duration** | Beginning: | End: |
| **Supplementary, clarifying and updated information** | | |
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| 1. **Project environment** | |
| **Is the project already in progress?** | If so, where? |
| **Has the project been submitted elsewhere?** | If so, where? |
| **Has the project been rejected elsewhere?** | If so, where? |
| **Has the project been partially financed elsewhere?** | If so, by whom? To what extent? |
| **Has partial financing been promised for the project?** | If so, by whom? To what extent? |
| **Supplementary and clarifying information** | **Supplement C:** Enclose a financing key/financing details |

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| 1. **Information on the (umbrella) association, organisation, club, advocacy group** | |
| **Umbrella association** |  |
| **Association/club name** |  |
| **Date of establishment** |  |
| **Street/no.** |  |
| **Postcode/city** |  |
| **Telephone** |  |
| **Fax** |  |
| **E-mail** |  |
| **Website** |  |
|  |  |
| **Bank details** |  |
| **Bank name** |  |
| **Address** |  |
| **Account no.** |  |
| **IBAN** |  |
| **BIC/SWIFT** |  |

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| 1. **Details of the Chairperson of the club/association** | |
| **Member of umbrella association/association** |  |
| **Department and function** | Chairperson |
| **Surname** |  |
| **First name** |  |
| **Date of birth** |  |
| **Field and discipline** |  |
| **Street/no.** |  |
| **Postcode/city** |  |
| **Telephone** |  |
| **E-mail** |  |

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| 1. **Details of the project manager** | |
| **Member of umbrella association/association** |  |
| **Department and function** |  |
| **Surname** |  |
| **First name** |  |
| **Date of birth** |  |
| **Field and discipline** |  |
| **Street/no.** |  |
| **Postcode/city** |  |
| **Telephone** |  |
| **Fax** |  |
| **E-mail** |  |
| **Website** |  |
| **Details of other project participants** | |
| 1. *In which function and with what commitment are applicants and participants involved in the project?* | |
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| 1. *What is the motivation of the people involved in the project (professional, volunteers, other)?* | |
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| 1. *What experience in the field of results-oriented project management qualifies them to carry out the project?* | |
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| 1. *Supplementary and clarifying information* | |
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| 1. **Information on final beneficiaries (a representative example)** | |
| **Institution/company** |  |
| **Date of establishment** |  |
| **Street/no.** |  |
| **Postcode/city** |  |
| **Telephone** |  |
| **E-mail** |  |
| **Website** |  |
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| **Criteria for inclusion in project** | What criteria entitle a private individual, sole proprietorship or SME to participate in the project? |
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Examples of inclusion criteria where final beneficiaries are private individuals:

* Income situation, asset situation
* Training (qualifications)
* Personal situation, family situation
* Traceable budgetary discipline
* Clear motivation and desire to improve the situation of the recipients (what has been tried so far)

Examples of inclusion criteria where final beneficiaries are sole proprietorships and SMEs:

* Intact, sustainable business model
  + What is the current market position? USP?
* Business owner/proprietor (suitability, own financial commitment)
  + How long has the current management been in place? When were the last changes made?
* Profit situation and liquidity situation (no immediate threat to existence)
* Balance sheet structure (no immediate restructuring measures required)
* No terminated bank loans and/or supplier credits
* No debt collection
* Clear motivation and desire to improve the situation

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| 1. **Financial situation of the final beneficiaries** | |
| **Supplement D** | Balance sheet, income statement  Attach a balance sheet and/or income statement for the representative example. |

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| 1. **Project description** |
| 1. *Detailed description of the project objectives* |
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| 1. *Procedure – what is needed to achieve the project objectives?* |
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| 1. *What is the broader context of the project in terms of its content?* |
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| 1. *What is the broader organisational context of the project?* |
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| 1. *Supplementary and clarifying information* |
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| 1. **Project budget** | |
| **Supplement E** | Attach a detailed budget for the project or the sub-project to be financed by the DEAR Foundation-Solidarité Suisse. |
| **Supplement F** | All material and personnel costs must be shown separately. |

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| 1. **Quality assurance** |
| 1. *Describe the planned milestones (formulation of objectives) and specify the individual project stages with the corresponding time specifications.* |
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| 1. *How is the achievement of the objectives monitored?* |
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| 1. *Describe the quality assurance and control process of the project.* |
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| 1. **Supplementary/relevant information** |
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| 1. **Personal references** *Provide relevant references from the relevant project participants.* |
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| 1. **Supplements** | |
| **Supplement G** | CV of the Party Chairperson |
| **Supplement H** | CVs of the project managers |
| **Supplement I** | CVs of the project team members |
| **Supplement** | other supplements |

The Board of Trustees reserves the right to obtain references and/or project assessments from an external specialist body.

The applicant(s) hereby authorise(s) the Board of Trustees to pass on the project documents for this purpose.

Place Date

Signature of the Party Chairperson

Signature of the project managers