**Application Form**

**Deadline: 17 November 2023**

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| ***Project Details*** | | | | | | | | |
| ***Project Name:*** | | | | | | | | |
| ***Project Site/Physical Address*** | | | | | | | | |
|  | | | | | | | | |
| ***Name of Organisation / Individual*** *(If applying in a personal capacity):* | | | | | | | | |
|  | | | | | | | | |
| ***Status of Organisation*** *(e.g. NGO, charity, non-profit, society):* | | | ***Date Organization Established*** | | | ***Registration Number*** | | |
|  | | |  | | |  | | |
| ***General Information*** | | | | | | | | |
| ***Email:*** | | | | | ***Telephone Number:*** | | | |
| ***Social media tag/pages:*** | | | | | ***Website:*** | | | |
| **Project Team** | | | | | | | | |
| ***Role / Designation*** | | | ***Name & Surname*** | | | ***Contact Details*** | | |
| *Project Leader* | | |  | | |  | | |
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| **Project Objectives** | | | | | | | | |
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| **Please describe your project and how it aligns with the below criteria (max 300 words)**  *(Please tick the relevant boxes)* | | | | | | | | |
| ***Biodiversity Enhancement*** |  | ***Sustainable practices*** | |  | ***Local economic development*** |  | ***Link to a conservation site*** |  |
| ***Youth involvement*** |  | ***Community Development*** | |  | ***Environmental Education*** |  | ***Cape Floristic Region focused*** |  |
|  | | | | | | | | |
| ***What is the long-term vision for your project and how do you plan on sustaining it once the Nature Connect funding has been completed? (max 150 words)*** | | | | | | | | |
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| ***How will you monitor and/or evaluate the impact of your project? (max 150 words)*** | | | | | | | | |
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| **Project Implementation Plan** | | | | | | | | | | |
| ***Activity*** | ***Time Frame 10 Months*** | | | | | | | | | |
| **M1** | **M2** | **M3** | **M4** | **M5** | **M6** | **M7** | **M8** | **M9** | **M10** |
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| **Project** **Budget** | | |
| ***Total Co-funding Amount*** |  | |
| ***Total Grant Amount Requested from Nature Connect*** |  | |
| **Item** | **Description** | **TOTAL COST**  **(Rands)** |
| ***Administration***  *(Max 6% of total request)* |  |  |
| ***Facilitator / Coordinator Costs***  *(Stipends, etc.)* |  |  |
| ***Travel / Transport*** |  |  |
| ***Capital Assets***  *(Equipment, etc.)* |  |  |
| ***Operating Expenses***  *(Materials, Permits, etc.)* |  |  |
| ***Workshops / Meetings / Training*** |  |  |
| ***Other:*** |  |  |
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| **TOTAL REQUESTED FROM NATURE CONNECT** | |  |

|  |  |  |  |  |
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| **Partners & Collaborating Organisations / Groups** | | | | |
| ***Organisation / Group*** | | | ***Active*** | ***Proposed*** |
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|  | | |  |  |
| **Referee Statements** (*Minimum of two contactable referees)* | | | | |
| **Name** | **Organisation** | **Contact Details**  **(Telephone & Email required)** | **Letter Attached**  *(Please tick)* | |
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| **Please tick to confirm the following documents have been attached:** | |
| ***Bank Account Details (Letter from the Bank/statement)*** |  |
| ***Organisation Registration or ID*** (If applying in a personal capacity): |  |

**Declaration from the Applicant:**

The information submitted in this application is true, to the best of my knowledge and information.

Name & Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please note the following:**

* No late applications will be accepted.
* Only one application per organisation will be accepted.
* Applications will be approved by a review committee.