****

**International Network of Engaged Buddhists**

**Application Requesting Funds for the**

**Female Sangha Initiative for Social Transformation in Southeast Asia**

**January – October 2021**

The International Network of Engaged Buddhists – INEB, based in Bangkok, Thailand, announces the availability of small grant funds for the **Female Sangha Initiative for Social Transformation in Southeast Asia.** Applicants can be submitted by not-for-profit organizations or groups from the Southeast Asia region. Individuals may not apply.

**The project implementation period is March 1, 2021 through August 31, 2021.**

Please refer to INEB’s Small Grant Guidelines for this initiative for more information.

Completing the following information is required.

|  |  |  |
| --- | --- | --- |
| **Applicant’s Details: Non-profit Organization or Small Group of at Least 3 Persons** | | |
| Applicant’s name - organization or small group requesting funds | |  |
| Address | |  |
| Email | |  |
| Phone and fax numbers | |  |
| Website address; social media, e.g., FB or Twitter, etc. | |  |
| Name and position of contact person | |  |
| Address | |  |
| Email | |  |
| Phone and fax numbers | |  |
| Organization’s country registration number, e.g., India has FCR. Applicant must be a not-for-profit organization or small group. | |  |
| **Bank Details** | | |
| Name of organization’s bank account; or a joint account of at least 3 persons who are the applicants: | |  |
| Account number: | |  |
| Name of the bank: | |  |
| Bank address: | |  |
| IBAN number:  SWIFT code: | |  |
| **References:**  Provide the names and contact information for 2 references. | | |
| **Reference #1** | | |
| Name of organizational reference |  | |
| Address |  | |
| Email |  | |
| Phone and fax numbers |  | |
| **Reference #2** | | |
| Name of organizational reference |  | |
| Address |  | |
| Email |  | |
| Phone and fax numbers |  | |

**These funds may be used to support new initiatives or ongoing programs. Please refer to the guidelines for the items which are not supported by the grant funds.**

|  |
| --- |
| **Description of Applicant – either Organization or Small Group** |
| **Please give an overview and background of your organization or small group that is applying for funds. This includes the year it was established, its mission, experience, and whether this is a new initiative or how this initiative may complement ongoing programs.** |
|  |
| **Project Description: Describe specifically how funds for the Female Sangha Initiative for Social Transformation in Southeast Asia will be used.** |
|  |
| **Situation Analysis** |
| **Scope of the Initiative:** Please give an overview of the current need and situation in the communities where the project will be implemented. Include the target groups, geographic locations (province, district, villages, etc.) and numbers of both direct and indirect beneficiaries. Include any specific challenges or risks. |
|  |
| **Project Implementation** |
| Describe the project design, methodology and implementation process for the activities that your organization will be undertaking. This includes: staff, coordination with local authorities and volunteers, ability to access locations that are difficult to reach, time frames and other information. |
|  |

|  |  |
| --- | --- |
| **Project Details for the Asian Female Sangha Initiative for Social Transformation** | |
| **Time Period** | |
| **Geographic location**  Number and name of villages, townships, or districts, etc. | |
| 1. **Estimated total number of direct beneficiaries** 2. **Estimated total number of indirect beneficiaries** 3. **Break out for both direct and indirect beneficiaries by:**  * Households * Individuals * Men, women and others * Children |  |
| **Please disclose and describe whether funds from other organizations are being received to support your initiative.** Give the organization’s name and amount of funds provided | |
| **If matching funds are being provided, please describe how these funds will be used to support the initiative.** | |

**Please prepare the budget using United States Dollars.**

**If funds are being matched, please show the amount being matched in the total budget.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed Budget** | | | |
| **Item** | **Unit Cost** | **Total cost**  **(Local Currency)** | **Total cost**  **(USD)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Matching funds |  |  |  |
| **Sub-total** |  |  |  |
| **Total Funds Requested** |  |  |  |

**Describe in detail what the initiative’s anticipated results are (Outputs, Outcomes, Impact):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Output** | **Outcome** | **Impact** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Documentation**

Financial Accountability: The project is required to maintain financial documents needed for independent audits. It will also submit necessary forms to INEB regarding receipt of funds and bank transactions.

Photo Documentation: The Project is expected to provide high quality photos which can be used in INEB’s documents, as well as through its website and social media outlets.

**Reporting Requirements**

You will be required to submit a report with financial and narrative information on funds expended, the number of persons who directly benefited from the emergency relief and describe the outcome of the relief activities and photos.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Application date

Organization or small group’s name

Individual’s name