Application Form For JAPAN's Grant Assistance for Grassroots Projects (GGP) in Bhutan

Attachment: Check List for Documents to be attached

Embassy of Japan,

This document was updated in June 2015

Notification

I. Kindly provide all the information as per following GGP Application Form.

*Please read carefully "Guidelines for GGP Application" and "Instructions for Filling up GGP Application Form".

*While filling up the form, please provide the information in detail (answer box can be expanded). However, the applicant *should not* change the application format

II. Incomplete application form is not acceptable.

*Please check thoroughly the application form and required documents (See "Check List for Documents to be attached") before submission.

III. Kindly submit the application by registered post / courier to the corresponding GGP office, or by hand with prior appointment with the office.

GGP Unit, Economic Section, The Embassy of Japan in India

50-G, Chanakyapuri, New Delhi, 110021

Tel: 011-2687-6564

Fax:011-2611-0752

* For any enquiries or clarifications, please contact the corresponding GGP office, and make prior appointment for a meeting with the office.

APPLICATION FORM FOR JAPAN'S GRANT ASSISTANCE FOR GRASSROOTS PROJECTS (GGP)

Part I. APPLICANT

1.	Name of the Applicant ¹
2.	FCRA No./ Date of Issue ²
3.	Registration No./ Date/ Place of Registration ³
٥.	/ /
4	Address
4.	Address
5.	Phone Number/ Fax Number/ E-mail/ Web page Address (If any)
6.	Responsible Individual (Name/ Designation/ Phone Number/ E-mail)
0.	/ / / /
	Organizational Structure 1. Year of Establishment
′-	1. Teal of Establishment
7-	2. Nature of the Organization ⁴
7	2 Number of Branches Field Offices and their Leastings
,-	3. Number of Branches, Field Offices and their Locations
7	4 Number of Staff members incl. Volunteers
/-	_
8.	Purpose of Establishment, Vision and/ or Mission Statement
	4.Number of Staff members incl. Volunteers (Permanent & Temporary, Administrative & Technical) and their Responsibilities Purpose of Establishment, Vision and/ or Mission Statement

Petails of Do Year & Duration	Name of the Donor	Nature of Donor (Choose from Foreign/ Bhutanese Gov't, Intern'l/ Foreign/ Bhutanese Funding Agencies, NGOs, Other Category)	Amount Received or to be received	/ Purpose of Fund
If you had mentioned Year & Mo	onth	the GGP grant in the pas	t, please g	Approval/ of Rejection
•	sed Project le			
II. Propo Project Tit The Projec	le			

U	oject Site ⁸			
3-1. A	ddress (Village/	District)		
	1	1	1 1	
	istance from the Nearest major c	-	city to the project site	
	istance from the GGP Office is De		GGP office to the projec	et site
	•	rom the corresp		he project site and time
G	GP Office to	Distance/	Major City to	Distance/
	Major City	Travel time	Project Site	Travel time
Ву	Air		From Airport	
	Bus / Car		From Bus Station curate as possible	
	• •	nditions of the P ainous, prone to	drought/ floods, if any.)	
		onitoring office is responsible fo	r monitoring the propos	ed project) ⁹
4-1. Do	escribe the iss	ue(s) targeted to	-	ssessment proposed project at the quantitative data that are

4-2	Describe the issues and the needs identified in the project site in particular, to bring out the situation and needs of the target group providing qualitative as well as quantitative data. (Please emphasise on the problems faced by the target group.)
4-3 .	Describe the organization's past/ current activities especially RELATED TO THE ISSUE(S) dealt with in the PROPOSED PROJECT and the outcomes/achievements. ¹⁰
	Based on the issue and needs identified, describe in specific, what kinds of assistance the organization is requesting from the GGP to add value to the past/current activities. (Please describe in details about the change in the nature and number of beneficiaries, if any, and how the requested assistance would address their needs) *In case of building construction, please mention ownership of the land.
	Outline of the Project
5-1.	Overall Goal and Objective(s) of the project ¹¹
	(a) Overall Goal There should be one overall goal of the project. The goal should be based on the issues identified in order to address the needs of the target group. The goal should help in bringing about the positive/ qualitative change in the long run.

(b) Objective(s)

ensuring benefits which are	verifiable. The objectives show	e achievement of the goal by uld indicate what you aspire to would have to take to achieve
5-2. Methodology: Describe t		ation process to achieve the
objective(s) of the propos Objective(s)	Strategies	Implementation process
5-3. Expected Beneficiaries at Kindly give details of ex expected impacts on them	pected beneficiaries including	ng its estimated number and
	Direct Beneficiaries (target group)	Indirect Beneficiaries
Details including the number	(taiget group)	
Expected Impacts/ Effects		
5-4. Stakeholder: Responsibil target group, local comm	unity, government, etc., unde	
6. Utilization/ Justification of th	ne Proposed Items	

6-1. List of proposed Items ¹³

*In case of building construction, please describe the units and its size on each floor.

SI. No.	Units	Quantity (Nos.)	Purpose/ Utility	User	Owner	Operating Life
					Applicant	
					Applicant	
					Applicant	
					Applicant	

agement a	asons for the s		to expand an exis	sting facility,
agement a	asons for the s	same.	to expand an exis	- Tacinity,
agement a	and Maintenan			
ribe how		ac plan		
ribe how		ac plan		
ribe how		oo nlan		
		ce pian		
		anage and maintain the pr	oposed item(s) pa	articularly in
s of opera	tional aspects	after the sanction.		
_		14		
oring and	d Evaluation of	of the Project '7		
describe	how the organ	nization will monitor and e	valuate impacts <i>l e</i>	offects of the
	_		-	
		Indicators	Means of Ve	rification*
				_
uld bo roos	dily available/se	n ha produced immediately		
uiu be reac	iliy avallabl e /ca	in be produced infinediately		
ct Budge	t: Estimated (Cost of the Project		
		Cost of the Project		
		Cost of the Project and Recurring Cost)		
ire Cost (N	Non-recurring		e project for bot	h requested
describe t providing	how the orgar g their indicate	nization will monitor and e ors as well as means of ve	rifications.	
	describe t providing Impacts/	e describe how the organ t providing their indicate Impacts/ Effects	t providing their indicators as well as means of ve	e describe how the organization will monitor and evaluate impacts/ et providing their indicators as well as means of verifications. Impacts/ Effects Indicators Means of Verifications of Verifi

order to give us the whole cost of implementation.

S.	Quan		Unit price	Total Unit	Total	То	be supported	by
No	Items	- tity	excl. tax	Amount	tax *	GGP	Applicant	Others
NO	NO	- tity	(Rs.)	(Rs.)	(Rs.)	(Rs.)	(Rs.)	(Rs.)
1								
2								
3								
4								
5								
Tot	al Amount							

^{*}Please indicate the tax amount for each item only in the given column. Do not include the tax amount in unit price or total amount.

1	Protection of the second						
	ndicate the am		_	roject ¹⁷			
Indica	ate the recurr	ing cos		anction of the Total			ar basis. orted by
S.No	Items		Cost (Rs.)	Amount (Rs.)	Applica (Rs.)	int	Others (Rs.)
					(7		\ - /
Give expen	a projection ises, which G rmat as given	of ma GP do below	anagement of es not supp	Other Expense of recurring ort, for 5 year	cost, taxe		f the projec
	Total Am (Rs.		Sources/	Fund Raising A	ctivities		Amount (Rs.)
Recurrii Cost							
(Per Yea	ar)						
	ar)						

8-3. Requested Amount from GGP (Non-recurring Cost excluding Tax)

Quotations (excl. Tax)*

(Rs.)

Company A | Company B | Company C

8-4. Give summary of quotations on both requested items and non-requested items from 3 builders/ suppliers in the format as given below and attach the quotations. ¹⁶

Selected

Quotation

(Rs.)

Reason

selecting

said Quotation

for

the

Rs.

Items

nra	100
DI O	ıect.

Schedule	after Sanction	Activities
1 st year	1 st month	
(Brief	2 nd month	
description	3 rd month	
about the	4 th month	
progress	5 th month	
of the GGP	6 th month	
funded	7 th month	
project	8 th month	
work)	9 th month	
	10 th month	
	11 th month	
	12 th month	(Note: The construction of buildings or installation of equipments must
		be completed.)
	1 st quarter	
2 nd year	2 nd quarter	
2 year	3 rd quarter	
	4 th quarter	
	1 st quarter	
3 rd year	2 nd quarter	
o year	3 rd quarter	
	4 th quarter	

		. quarto		
	3 rd year	2 nd quarter		
		3 rd quarter		
		4 th quarter		
10.	-	d planned stra	-	rage the process in implementing the come the same. (e.g. cost escalation,
Е	xplain how th		e project will b	e operationally and financially sustained g up a committee, etc.)
l	Date of Subn	nission:		
ı	Name of the	Applicant Orga	nization:	
ı	Name of the	Responsible In	dividual:	
-	Title/ Design	ation:		

Signature:	
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Check List for Documents to be attached

Please confirm that all the required documents are attached before submission!!

<u>A</u>	<u>)</u>	For all projects
[] Copies of the registration certificate under the relevant registration Act
[]	Brochures and pamphlets and annual reports
[]	Annual reports for the last 3 years
[]	Audited financial statements for the last 3 years
[]	Organizational chart with a list of staff and executive members
[]	Maps and photographs indicating the location of the project site in the concerned state
		as well as a route map from the nearest major city to the site
[]	Quotations from 3 different suppliers on proposed products and/or services duly signed by
-	_	the suppliers (Each quotation must separately show the tax component.)
[]	Copy of sanction letters from the donors, if any, promise to support the specific expenses in
	_	the proposed project
В) I	For building construction
[]	Copy of the documents which ensure that the land for the project is owned by the applicant
		organization
[]	Copy of the documents which ensure that the construction is approved by the concerned
		local authorities
[]	Copy of the documents which ensure the local authority's approval in setting up a primary
	_	health centre, educational Institution, hospital, water plant, etc.
[]	Copy of the blueprint of the building plan/ design prepared and attested by registered
	_	architect (The blueprint should show the exact total area of the building.)
С) l	For formal schools
[Copy of the documents which ensure the permission to run schools from concerned local
		authority
D) I	For hand pumps or water harvesting structure
[Copy of the documents which ensure the possession of the land for the project
[Copy of the documents which ensure the permission for the installation
Г	1	Copy of the blueprint of the construction and/or installation plan/design

E) For medical equipment

[] Copy of the documents and/or catalogues which show the feature, details and specification of the equipment						