

The Global Fund for Forgotten People

Grant Application Form

All applicants are reminded that they should refer to the Global Fund's **Grant Making Policy** to ensure their project is eligible to seek support

This is a Grant Application Form to be submitted to the Board of Trustees and Directors – The Global Fund for Forgotten People.

Please complete the requested information below, using bullet points or note form where possible.

If you have any questions at all, please contact the Grants Team in the UK – grants@forgottenpeople.org

GENERAL ORGANISATIONAL INFORMATION

Contact details

Please provide details of the principal contact person for this application

Contact name	
Job title	
Telephone (office)	
Mobile/Cell	
Email	

Organisation details

Please provide details of the charitable organisation that controls or coordinates the project that you are submitting the application for.

Charitable organisation name	
Web site and Social Media pages (if applicable)	
Charitable registration authority	



**THE GLOBAL
FUND FOR
FORGOTTEN
PEOPLE**

The Order of Malta

Charitable registration number	
Registered address of charitable organisation	
Country of registration (and Head Office, if this is different - please specify)	
Year of charitable registration	
Registered charitable purpose	
Principal charitable activities and location of activities	
Annual Income & Expenditure (US\$)	
Details of Board of Directors or Trustees e.g. full names, contact details and positions held	

PROJECT INFORMATION

The following questions relate to the project that you would like The Global Fund for Forgotten People to support. Please complete all questions.

General information

1. What is your project called?

e.g. Soup Kitchen for the elderly

2. Which Forgotten cause does it address?

Please indicate with 'X' in the relevant box. Please do not alter or add to this list

- People with neglected diseases
- The elderly
- Prisoners and their families
- Children and adults with disabilities
- The homeless
- Displaced people
- Mothers and new-borns without healthcare
- Marginalised communities

3. The Global Fund for Forgotten People provides support to projects that are owned, controlled or delivered directly by the Order of Malta. Please detail how this project is managed.

If the project is a partnership between the Order of Malta and a local partner, please give details of the partnership (what oversight is retained by your entity of the Order? Is there Order branding/visibility for the project?) Please provide copies of any formal agreements.

4. Where does the project operate?

i.e. Geographical location.



**THE GLOBAL
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The Order of Malta

5. What are the objectives of the project?

e.g. To provide healthcare for x community which is affected by x issue

e.g. To reduce infant mortality in x place by 40%

6. If the project is already running, what has it already achieved?

e.g. Establishment and construction of a small clinic with 50 beds

e.g. Local transport to enable remote communities to access services

7. What are the project's key activities? What are the project aims for the next year?

8. How many staff members and how many volunteers are involved in the running of the project?

Target Beneficiaries and Social Need

9. Who are the target beneficiaries of this project? Please provide a profile of those you are helping, explaining briefly the social need for the project and why the people you help are 'Forgotten'.

e.g. Homeless people living in the city. The city has the highest rate of homelessness in the country, with X number of people living on the streets. However, there is little social support or provision from the state meaning these people are often forgotten.

10. If the project is already running, how many people is it currently helping?



**THE GLOBAL
FUND FOR
FORGOTTEN
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The Order of Malta

11. How many people do you anticipate that this project will help in the coming year?

Please include direct and indirect beneficiaries if relevant.

12. Is there anything your project does that other agencies cannot or do not do?

e.g. we reach people who other charities miss by working closely with local residents

13. How would you use a grant from The Global Fund for Forgotten People? What difference would the grant make to this project? What additional impact could the project have? Please be as specific as possible e.g. additional numbers reached, improved service provided

e.g. With \$x more funding we could reach x more people OR with \$x funding we could implement a new service area.

Additional information

14. Are other charitable organisations working alongside you?

e.g. Yes, the Red Cross is helping under 5s with the same problem but no-one else targets the whole group

15. Does the project have opportunities for donors to visit the project?

Yes / No. Please provide basic information/ experience if so.

16. What measures are in place to ensure the project's long term future is secure?

e.g. We train x local nurses each year to deliver the work so that, over the course of five years, the project has a clear exit strategy; or we are co-operating with the local government to increase awareness of the issue and equip them to take responsibility (e.g. for finances or project delivery) or this intervention is by its nature unsustainable which is one reason the beneficiaries have largely been forgotten; nevertheless, alternative sources of funding are being investigated.

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Financial information

Please use this section to give us more information on the finances of the project in question and an indication of the amount you would like to apply for.

All grant amounts are awarded in US Dollars (US\$), however you may choose to have the funds transferred in a currency of your choosing.

Has this project received a grant from the Global Fund for Forgotten People before? If so, please provide details of the dates and amounts	
Total annual expenditure of project (US \$)	
Amount allocated for administration and overheads (of existing annual expenditure, US \$)	

Requested amount from The Global Fund for Forgotten People (US \$)	
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There are opportunities for larger scale collaborations and matched funding. If you are interested in this, please contact the Fund office before submitting your application.

Please attach in Excel a detailed annual budget for this project. The budget should include both a detailed outline of the expenditure of the project as a whole and a breakdown of how the grant from The Global Fund for Forgotten People will be used.

What other sources of funding are available for this project?

Donors (names), foundations and grants. Association or Relief Service national budget allocation

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Is the project externally audited?

Yes

No

CHECKLIST AND SUBMISSION

Please send the form to grants@forgottenpeople.org, for the attention of the 'Board of Trustees, The Global Fund for Forgotten People' (or in hard copy to the address below). To complete your application you will also need to attach the below documents. Where possible, please send documents in English:

- Most recent annual report (if available)
- Most recent financial statements (2 years), audited (if available)
- Detailed budget/ financial summary for project and expenditure of grant (in Excel)
- Copy of charitable registration document(s)
- Copy of safeguarding policy
- Up to 10 high-res photographs (with permissions if appropriate) including details of what/who the photograph shows. Photos should be send as separate attachments and not embedded in word or pdf documents.

If applicable:

- Any available references from other donors, beneficiaries / partner NGOs
- Any press coverage or awards of recognition

As part of the funding agreement, donors may wish to request external evaluation and/or updated copies of the above documentation at any time. Please confirm that this is acceptable.

- Yes

You are welcome to provide any other background or supporting information which you think may be relevant to your application.

(Please note that funding is not guaranteed and will be considered on a case by case basis)

Postal address:

The Global Fund for Forgotten People
30 Upper High Street
Thame
Oxfordshire, OX9 3EZ
United Kingdom

GRANT TYPE

Please tick the box for the type of grant you are applying for:

- Hospitaller Grant (recommended by a President or Hospitaller of the Order)
- Embassy Grant (recommended by an Ambassador of the Order)



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DECLARATION

I confirm that:

- To the best of my knowledge and belief, all the answers given in this application are true and accurate.
- The organisation will adhere to the terms and conditions of the grant should this application be successful.
- I am duly authorised to sign this declaration on behalf of the organisation named on this application.
- If the funds are received, they will be used for the purposes stated above.
- Any funds not so used will be returned.
- Any reports requested on the use of funds will be submitted.

Signed*: _____

On behalf of: _____

Position: _____ *e.g. Project Manager/ Organisation Director*

Date: _____

**An electronic signature is sufficient.*