**GENERAL GRANTEE INFORMATION**

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| --- | --- |
| **Type and name of the entity** |  |
| **Date of an entity’s registration or start of independent professional activities** |  |
| **Legal address and physical address (if different)** |  |
| **Individual Point of contact:**   * *Contact details of the authorized signatory (name, title, phone, e-mail)* * *Main point of contact details (name, title, phone, e-mail)* |  |
| **Applicant Contact information:**   * *Mailing post address:* * *Office phone (if any):* * *Website (if any):* |  |
| **Type of Applicant:** | For Profit (ex. agri logistics, consulting, training)  Non-for-Profit/Non-governmental Organization (NGO)  Member-based organization  Government or public enterprise  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Title of the proposed grant:** |  |
| **Location** |  |
| **Anticipated start date and duration (in months)** |  |

**Application Objective:** (note: this will determine which technical team evaluates your application).

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| **Select One**  (Choose the best match even if your proposal supports both) | **Objective 1: AGRI-Ukraine:** | **Objective 2: Cargo processing capacity at BCPs** |
| **Select**  **1-3** | 1.1 Agri-logistics companies improve knowledge of international best practice on grain trade, sales and marketing, develop and improve sales to new markets.  1.2 Co-funding agri-logistics equipment  1.3 Upskilling and improving agro-logistics current and prospective staff competency on use of transport, logistics and laboratory equipment for grain export. | 2.1 Improve the process in BCPs which leads to improving of capacity  2.2 Improve cross-border collaboration between Ukrainian customs and bordering customs officers in EU and Moldova; |

*Please use the following template to submit your grant application. Section A Technical Application should* ***not exceed 10 pages****. Instructions provided in* ***italic may be deleted****.*

1. **TECHNICAL APPLICATION**
2. **Intro**

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| Briefly summarize who you are and what are your proposed activities and qualifications |
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1. **Technical Approach**

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| * 1. **Problem Statement and Objective:**   What is the issue or problem that given grant activity/intervention will address? Please align your application to one or more of the stated APS objectives. This may vary based on the type of applicant and the target objectives of the activity. Businesses should discuss specific constraints on the growth of their business and why it is important to address these constraints in order to achieve long-term financial success and growth. Non-profits, NGOs, public institutions, etc. may discuss the social, public, or workforce development issue they seek to resolve. |
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| * 1. **Purpose:**   State in 1-2 sentences the goal of the activity with quantifiable key performance metrics. |
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| * 1. **Detailed Activities: describe the proposed activities, specifications and requirements:**   In this section, applicants explain how they will accomplish their objectives. Activities should be numbered and listed clearly.   * When proposing the purchase/use of new technologies, proposed investments, and technical assistance needed, applicants will be evaluated on the clarity of the specifications and requirements provided, strength of analysis, and feasibility of achieving expected results based on proposed activities; provide links, product model numbers, etc.). * For training and capacity building activities, detail the process and how trainings are delivered in terms of location, methodology and scale. Be as specific and concise as possible. |
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| * 1. **Anticipated grant direct results (key performance indicators):**   Provide at least three (3) key performance indicators listed in the APS under your selected objective and quantify the results of your proposed activities |
| * **X** * **X** * **X** |
| * 1. **Anticipated grant /intervention impact (outcomes):**   How will the grant intervention improve Ukraine’s long-term economic recovery, growth and resilience and future integration into the European Union. |
|  |
| * 1. **Please describe how the activity will be sustained after USAID funding. How your organization continue to operate and grow as a result of the grant?** * What co-financing/contribution are you or your partners/beneficiaries putting in. * The business case; revenues, job creation, and profitability (for the applicant itself or its target beneficiaries) * Future financing: how the company will raise private financing or reinvest in the activities in the future (non-profit applicants may present how their work will be sustained over time through existing or planned partnerships) |
|  |
| * 1. **How will this activity ensure equitable and inclusive economic growth and address challenges affecting the women, youth, conflict affected businesses and individuals, and persons with disabilities.** * Within the life of the grant, how will you increase employment, leadership and/or business opportunities for women, youth, conflict-affected or those with disabilities? * In the long term, how does your approach result in more inclusive and sustainable growth in terms of institutional capacity, policies, practices, and relationships? |
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1. **Past Experience**
   1. ORGANIZATIONAL OVERVIEW

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| * 1. **Organizational Overview; provide more details on your past experience, qualifications and capacity to implement the proposed activities.** * Years experience in the same/similar industry and type of activities. * Management and ownership information, management structures, policies and procedures; * Similar activities the entity has implemented/ past performance; management capacity. * Credentials (authorized dealers, certification ISO/HAACP, etc., accreditations, professional membership, accolades * Target markets, clients or beneficiaries for your goods and services. * Number of employees (male and female) |
|  |
| * 1. **Revenue and market information** * Annual revenue from sales or donor contracts/programs for past 3 years * Number of clients (end markets, students/trainees) * Assets relevant to proposal (facilities, vehicles, etc.) |
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| * 1. **Examples of Similar experience (2-3) in the past 5 years** * 2-3 case studies or other examples of similar work |
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* 1. **Personnel / Management**

**List personnel who will be involved in implementing this project.**

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| --- | --- | --- | --- |
| **No** | **NAME & SURNAME** | **POSITION** | **Description of responsibilities in the project** |
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* 1. **References**

Please list contact information for three (3) references from previous and/or current donors/partners/clients or organizations that your entity has collaborated with and/or collaborating currently:

*Please provide correct information that ERA can contact indicated persons for references.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Client (donor/client)** | **Year(s) of cooperation** | **Brief description** | **Contact details** |
|  |  |  | Name:  Job position:  Contact email:  Contact phone: |
|  |  |  | Name:  Job position:  Contact email:  Contact phone: |
|  |  |  | Name:  Job position:  Contact email:  Contact phone: |

1. BUDGET NARRATIVE

The budget narrative section does not count toward 10 page limit.

Please indicate the total estimated cost categories from the developed budget for the proposed project in the section below. Please indicate the amount requested from USAID ERA in UAH in the cost categories and the total requested amount in UAH and USD according to the current exchange rate of the National Bank of Ukraine***.***

**Summary cost of this activity/intervention in UAH/USD:**

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| --- | --- | --- |
| **Summary Costs** | **TOTAL**  **(UAH)** | **TOTAL**  **(USD Est.)** |
| Total grant funds requested from USAID ERA |  |  |
| Applicant contribution (cash, or in-kind) |  |  |
| Other contributions by beneficiaries, donors or third parties (if applicable): |  |  |
| **Total estimated cost** |  |  |

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| --- | --- | --- |
| **COST CATEGORIES (USAID GRANT FUND REQUEST ONLY)** | **TOTAL**  **(UAH)** | **TOTAL**  **(USD Est.)** |
| Labor/Salaries (Internal Employees, Short-Term Consultants) | (UAH) |  |
| Materials/Equipment | (UAH) |  |
| Travel, Transportation, and Allowances | (UAH) |  |
| General/Operational costs | (UAH) |  |
| Activity Costs | (UAH) |  |
| ***Total*** | **(UAH)** |  |

Please list all costs in the same order as in the project budget (Annex 2\_Excel Budget).

You can remove unnecessary expense categories according to your project budget.

1. Labor/Salaries

You can budget salaries and honoraria of the staff directly involved into the project implementation.

1. Internal Employees

Please include name of the person, position, Scope of work, percentage of involvement and salary rate of the internal employees.  Please justify the salary rate. Direct salaries should be proposed in accordance with the Applicant's personnel policy (if any). Please indicate State Social Tax on salary for full-time employees.

1. Short-Term Consultants

Please include name of the person, position, Scope of work, and honorarium rate of the short-term consultants. Please justify the rate indicated. Private entrepreneur taxes should be included in the remuneration rates indicated in this budget category.

1. Materials/Equipment

Specify all materials and equipment expected to be purchased, including type, unit cost, and number of units. Please provide the link to open recourses with an illustrative example of the requested items. For the specialized type of equipment please provide the specifications and other important information, e.g., availability on the Ukrainian market, and other aspects.

1. Travel, Transportation, and Allowances

Please indicate a number of trips, domestic and international, and the estimated costs per trip. Please specify the origin and destination for each proposed trip, duration of travel, and number of individuals traveling. Allowances should be broken down by specific type and by person. Any allowances should be in accordance with the Applicant’s policies (if any) and the applicable regulations and policies.

1. General/Operational Costs

Please use this budget category for other costs directly associated with the project, that do not fit any of the other categories. Examples include lease and rent payments, utility and communication costs, office supplies required for the project. Please justify the costs with the supporting documents (e.g. lease agreement) or links  to open recourses with an illustrative example of the requested items.

1. Activity Costs

Please include costs that are directly related to activities performed during the project (e.g. trainings, surveys, workshops or others, including relevant expenses for their implementation).

Grantee contribution (if any)

Please list all grantee contribution costs indicated in the Budget Excel File. Please provide cost justification.

By affixing my signature below, I certify that to the best of my knowledge, the information provided in this application is accurate and correct:

Submitted by (name and title):

Signature: Date: