OFFICIAL APPLICATION FORM
FOR

THE JAPAN’S GRANT ASSISTANCE FOR GRASSROOTS

HUMAN SECURITY PROJECTS (GGHSP)

IN GHANA, LIBERIA and SIERRA LEONE



Instruction

* Please read **‘‘Information & Guidelines’’** carefu lly before filling out this form.
* An incomplete Application Form is considered invalid.

( e.g. No check mark, skip an answer to a section in the form including the questionnaire page, or blank items on the statement of agreement )

* If any item is not applicable to your case, please state N/A.
* Please do not delete or change section numbers and its titles.
* Please do not modify or add on to questions provided in the form
* Please keep a copy of this form and all supporting documents as your formal filings.
* Please send your application form by post/email to:

Coordinator for the GGHSP

Embassy of Japan in Ghana

Dr.Hideyo Noguchi Street, West Cantonments, Accra, GHANA

(P.O.Box GP1637, Accra)



[1] Applicant information

* 1. Your Country: [ ]  Ghana [ ]  Liberia [ ]  Sierra Leone
	2. Name of your Organisation:

* 1. Type of Organisation:

[ ] 　Non-Governmental Organisation / Non Profitable Organisation

[ ] 　International NGO / NPO with a local office

[ ] 　Local NGO / NPO

[ ] 　Local Government

[ ] 　Educational Institution

[ ] 　Health Institution

[ ] 　Others (Please specify: )

* 1. Registration and Establishment

[ ] 　Registered in (year) and Established in (year)

[ ] 　We are a governmental entity, so we don’t need to register ourselves.

* 1. Number of Paid Staff:

* 1. Mailing Address (P.O.Box, C/O address, or address to receive courier services):

* 1. Physical Address (Street address of Office Location):

* 1. Office Phone:

* 1. Web Site:

* 1. Representative of the organisation:
* Name : 　　　　　　　　(Mr./Ms.)
* Title :
* Mobile Number :
* E-mail :
	1. Project coordinator (Contact person for your project)
* Name : (Mr./Ms.)
* Title :
* Mobile Number :
* E-mail :
	1. Purpose of Establishment (summary):

* 1. Main Activities (summary):

 **[2] Outline of the Project**

* 1. Tentative Title of the Project:

The Project for

at/in

* 1. Main Category of the Project:

 [ ] 　Basic Education

 [ ] 　Primary Health Care

 [ ] 　Water & Sanitation

　[ ] 　Agriculture

 [ ] 　Others (please specify)　(　　　　　 　)

* 1. Project Site

Country : Region/County :

District/Municipal :

Chiefdom / Section :

Town /Community :

* 1. Current Situation and Issues:

\*What challenges / current issues are you seeking to resolve?

* 1. Objective(s) of the Proposed Project:

* 1. Components of the Proposed Project:

[ ]  Construction of [ ]

\* Please attach a draft Floor Plan.

[ ] 　Furniture/Equipment

\* Please attach a List of Furniture/Equipment with quantities.

[ ] 　Seminars/Training

\* Please attach draft concept note and Programmes.

* 1. Expected Effect of the Project:

* 1. Number of People who will DIRECTLY benefit from the Projec:t

* 1. Estimated Amount for the proposed Project with a summary breakdown including Audit Fee (in local currency):

* 1. Project Duration (under 12 months):

**[3] Sustainability**

* 1. Who is the current owner of the land?

* 1. Who will be the owner of the land after the completion of the project?

* 1. Who will own the completed facilities and furniture/equipment?

* 1. Who will manage the services provided through the facilities, furniture/equipment, and pay for its running cost?

* 1. Who will maintain (Daily maintenance and Major maintenance) the facilities and furniture/equipment?

* 1. After the completion of the facility, who will provide the necessary personnel and their remuneration for the services at the facility?

**\_Questionnaire**

Have you ever applied for the GGHSP scheme before? [ ] 　Yes / [ ] 　No

If yes, was your application successful?

[ ] 　Yes ( Year : )

( Project title : )

[ ] 　No ( Most recent year when it was unsuccessful : )

( How many times have you applied in total? : )

How did you know about the GGHSP scheme?

(You may tick multiple answers if applicable; please specify them in the brackets)

Your answer will be solely used for statistics, and will not affect to the Embassy’s decision on your application.

[ ] 　My government authority ( )

[ ] 　Any other Public Body ( )

[ ] 　An organisation that has already applied to this scheme before ( )

[ ]  JICA (Japan International Cooperation Agency) ( )

[ ]  Any other Japanese public or business entities ( )

[ ]  Embassy of Japan /Ministry of Foreign Affairs of Japan

[ ]  Other ( )

**\_Statement of Agreement**

Please read the following statements and sign on it. Kindly note that the signer to this agreement should basically be a representative from your organisation/institution, and should be the signer to the Grant Contract when it is approved. The Embassy will proceed with the application procedure only when applicants have agreed to the statements below:

H.E. Ambassador,

The Embassy of Japan in Ghana/Liberia/Sierra Leone

Dear Sir,

I, the undersigned, hereby declare that the statement given in this Application Form is true and correct, and that, when necessary, I will provide more information as requested by the Embassy of Japan.

I further understand that I cannot request an additional assistance later for the same project described in this Application Form.

Date:

Name:

Title:

Name of Organisation:

Signature:

Note:

If application is submitted by email, please send it in PDF or MS-Word form. In case that your application is submitted in the form of MS-Word, a scanned copy of this page with the signature should be attached. Please be informed that our mail server cannot receive an email with attachments exceeding 10MB in total.