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| **UNITED NATIONS**  United Nations Stabilization Mission in Haiti |  | **NATIONS UNIES**  Mission des Nations Unies pour la Stabilisation en Haïti |

MINUSTAH

QUICK IMPACT PROJECTS

# REQUEST FORM

# Project Reference #: ………….

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| 1- ORGANISATION Name of the organization under whose name a bank account has been opened. All funds transfers will be under this name as indicated | | **2- NAME OF REQUESTER**  Name of organization / Person in charge of the project | | |
| **3- ADDRESS**  The address of the person responsible | **4- TEL./E-MAIL**  Phone number and e-mail address of the applicant | | | **5- DATE**  Date of submission of project |
| **6- TYPE OF ORGANISATION (which legal status– attach justification/proof if possible)**  Indicate the legal statute of the organization: example: official institution, governmental structure, NGO, association (attach a copy of the certificate of recognition for associations or civil organizations). | | | | |
| **7- DESCRIPTION OF THE ORGANISATION**  Description of the organization: objectives, the number of members, employees, spheres of activities (make a summary of the activities), date of existence. | | | | |
| **8- NAME AND TITLE OF THE PERSON RESPONSIBLE FOR THE OPERATION**  Name and title of the person in charge of the management and the execution of the project. This person will have to submit the management reports relating to the execution of the project | | | | |
| **9- PROJECT TITLE**  Project title- example: modernization of the office; training of the trainers; cleaning of the market; rehabilitation/police station/place. Indicate location as well. Note: title should be concise, not too long. | | | | |
| **10- AGENCY /INSTITUTION TO EXECUTE THE PROJECT**  Name of the organization that will carry out the project. Example: name of NGO | | | **11- CHARACTERISTICS AND NUMBER OF BENEFICIARIES (men/women, boys, girls)**  Estimated number of beneficiaries. Indicate if possible the number of women, men, girls and boys. | |
| **12- ACTUAL PLACE OF OPERATION**  Place or site of the project. Name of the village or the city, the municipality, the department. | | | | |
| **13- COSTS (Indicate the estimates and other relevant information in GOURDES)**  The project budget must be based on the best price sought. Provide a minimum of three proformas. If not, possible, justify. The originals must be presented with this request. If the organization or the applicants will choose a higher amount among the proformas, a document in proof of a specialist will have to be presented. The proformas and the budget must also include the quantity of materials, the unit price, dimensions of materials, the number, and many employees. If it is about a project of rehabilitation, the specifications of the equipment must be also indicated. | | | | |
| **14- HAS THIS REQUEST BEEN SUBMITTED TO OTHER DONORS? (If YES, please specify)**  Has this request been submitted to other donors? If so, indicate the name and the contact information of the organization. | | | | |
| **15- IN CASE OF FINANCING BY MULTIPLE DONORS/PARTNERS, PLEASE INDICATE THEM HERE:**  In case of financing by multiple donors/partners, please indicate their name and the amount of funding. Example: Ministry for Women’s condition xxx gourdes (xxx USD) | | | | |
| **16- RELATED EXPERIENCES IN A SIMILAR PROJECT AREA**  Please indicate if you/your organization possesses any related experiences in a similar project area | | | | |
| **17- PROJECT DESCRIPTION (Describe what this project will achieve and the activities to achieve the goals).** | | | | |
| **18- NEEDS ASSESSMENT FOR THE PROJECT (Evaluation of the situation)**  Describe the present conditions and justify why the project is necessary. Explain the problems that the project intents to solve. Mention how the project will meet the needs indicated above. | | | | |
| **19- GLOBAL OBJECTIVES / SPECIFIC OBJECTIVES:**  Describe the global and specific objectives of the project and in what context they come. | | | | |
| **20- PROJECT EXECUTION (Brief description of the operations and their durations)**  (Short description of the operations and their duration. Enumerate and describe in a narrative way the various phases of the project, as well as their duration.) | | | | |
| **21- PROJECT’S SENSITIVITY TO GENDER ISSUES**  Indicate how this project takes into account specific needs and interests of women; explain how implementation of the project will involve both men and women. | | | | |
| **22- REMARKS/OBSERVATIONS**  (Include observations and comments that will be useful in assessing the value of this proposal). | | | | |
| **23- BUDGET DETAILED PER AREA/SECTION OF ACTIVITY:**  (Attach the budget in Excel (signed)   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **No.** | **Description** | **Unit Cost** | **Qty** | **Total** | **Local Contribution** | **Amount Requested** | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | | | | | |
| **24- TIMELINE OF ACTIVITIES : (Include evaluation and monitoring phase)**   |  |  |  |  | | --- | --- | --- | --- | | Activities | **Month 1** | **Month 2** | **Month 3** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | Evaluation of project |  |  |  | | | | | |
| **25 – PROJECT VIABILITY AND SUSTAINABILITY (Mention the possible risks the project will face; how can they be solved. Mention elements that ensure that the project can be successful. In addition, describe how your organization will ensure the continuity of the project after MINUSTAH’s financial support ends)** | | | | |
| 26- JOBS TO BE CREATED (Provide an estimation of the number of man-days) | | | | |
| 27 – VISIBILITY (Indicate how your project will exhibit the support you have received from MINUSTAH) | | | | |
| 28- AGREEMENT  * I, hereby, confirm that this project is not for commercial purpose. * In the event that financing for this project is approved, I will endeavour to utilise the allotted funds to complete the above mentioned project and to submit interim/final reports and other reports as required, including the original invoices during the given time frame. * I accept, as a consequence, to return to MINUSTAH all the funds and/or equipment not utilised.   Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |

**NOTES TO QIPS APPLICANTS:**

Please ensure that all the documents mentioned below accompany your request for QIPs funding. The non-submission of any of these documents may result in the rejection of your proposal.

**For all QIPs proposals regardless of the status of requesting entity**

* The QIPs Request Form should be duly completed and signed by the requester
* An architectural plan (sketch) for rehabilitation or construction projects
* Modules, training themes and other relevant documents for sensitisation initiatives in the areas of demobilisation, disarmament, peace, human rights, justice, electoral process and institutional support

**For the mayors:**

* The QIPs Request Form should be duly completed and should be signed by all three mayors, i.e., mayor and the two deputy mayors.

**For NGOs, Associations and other organisations:**

* A copy of the legal attestation from the Ministry of Social Affairs or relevant ministries

**Supporting Documents**

In support of your request file, you may also wish to provide us with the following:

* Recommendation letters from international/national organisations with and/or for whom you have implemented projects in the past.
* Photographs illustrating your project