****

**MINADER/PADFA II INNOVATION FUND**

**APPLICATION FORM**

 **Filling Date: Day :………....…../Month……………………….……/Year…………..……**

**NB**: This form can be printed and completed in handwritten form or directly electronically (best mode to facilitate reading).The information provided should be precise and concise . The completed form must not exceed eight (8) pages.

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| **1. IDENTIFICATION OF THE BENEFICIARY** |
| **1.1. Name of the Organization** |
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| **1.2. Name of the main manager** |
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| **2. PROJECT** |
| **2.1. Project title: Give an idea of the content of the Project** |
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| **2.2. Project theme (tick your choice)** |
| * **Theme 1 : Improving seeds activities and rice and onion production**
* **Theme 2** : Improvement of post –harvest of rice and onion operations
* **Theme 3 : Improving the organization, marketing**, warrantage, financial services and management of resource within POs / Cooperatives
 |
| **2.3. Type of work (Give a brief description of the proposed innovation)** |
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| **2.4. Project site : Give an idea of where the project will be carried out** |
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| District: |
| Division : |
| Region : |
| Other sites : |
| **2.5) Target groups (which groups are directly targeted by the project: users and beneficiaries)** |
| List the groups :  |
| Estimated size of direct and indirect beneficiariesDirect : **………………………….** / Indirect :**……………….** |

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| **2.6 Briefly outline the current issue (s) and challenge (s) and how the project will help resolve them.** |
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| **2.7 Reason why funding is essential / why the organization or the manager cannot solve the problem on their own.** |
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| **2.8 What efforts has the organization or manager made to resolve the above problem?** |
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| **2.9 Expected impacts of the project on the target groups (Specify changes and the number, qualitative and quantitative, of beneficiaries beyond 3 to 4 years, between 2024 and 2025)** |
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| **3. COST AND SUSTAINABILITY OF THE PROJECT** |

The budget estimate is acceptable but it needs to be realistic.

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| **3.1 Source of funds** | **Project Activities / Articles** | **Amount (CFA francs)** |
| **Innovation Fund of MINADER/PADFA II** |  |  |
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| **Total innovation Fund(< 10 millions CFA Francs)** |  |
| **Contribution of the organization** |  |  |
| **Other contributions (name them)** |  |  |
|  **Total cost of the project** |  |  |

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| **3.1. Management of project Fund** |
| **Do you have a bank acccount ?** | * **Yes**
 | * **No**
 |
| **Do you agree to open a separate bank account for the project?** | * **Yes**
 | * **No**
 |
| **3.2 Duration of the project (between 6 months and 24 months after signing the contract)** |
|  |
| **3.3. Description of the different phases of the project.**The project can probably be launched in July-September 2022 according to the schedule of the signing of the contract |
| ***Months from the year 2022-to 2023******ACTIVITIES*** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
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| **3.4 Strategies for project sustainability (After completion of the project, who will be responsible for its management to ensure the sustainability of the project?** |
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| **4. ORGANIZATION INFORMATION** |
| **4.1 TYPE OF ORGANIZATION** |
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| **4.2 ORGANIZATION ADDRESS**  |
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| **4.3 Staffing size (indicate the number of men, women and young people)** |
|  Total Staffing………………Men…………….. Women…………………….Young people……………………. |
| **4.4 STAFF COMPOSITION AND SKILLS (Managers and people in charge of the project are included)** |
| ***S/N*** | ***Names and Surnames*** | ***Organization*** | ***Role*** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
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| **4.5 MAIN ACTIVITIES OF THE ORGANIZATION (Include the purpose of the organization here too, please.)** |
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| **4.6 PROJECTS ALREADY CARRIED OUT BY THE ORGANIZATION****Attach documents relating to the project (s) (e.g. report, minutes, certificate or contract)** |
| ***Year*** | ***Title of the project******/Detail of the activities/location*** |  ***DONOR NAME*** | ***AMOUNT*** |
|  |  |  |  |
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| **4.7) PARTNERSHIP (Include existing partners or partners to be contacted / involved in the project, provide the letter if possible** |
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|  |

**Date and Place………………………………………………...**

 SIGNATURE OF THE MAIN MANAGER OR HIS REPRESENTATIVE