

**Application for project funding in developing countries**

**Date of application:**

The application should not exceed a maximum of 6 pages: Arial 11pt single spaced, DIN A4, line spacing 1.5, appendices excluded

The application must be written in English

**1. Personal information**

* 1. **Contact person in Switzerland, member of gynécologie Suisse SGGG**

Surname, first name:

Address:

Phone number:

E-mail:

1.2. **Contact person in the country of assignment, local project partner**

Surname, first name:

Address:

Phone number:

E-mail:

1.3. **Partner organization (s),** we request a support letter and a brief description from the partner organization

Name of the organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surname, first name:

Address:

Phone number:

E-mail:

Name of the organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surname, first name:

Address:

Phone number:

E-mail:

**2. Project and content**

* 1. **Project title:**
  2. **Project manager may be the same as in 1.1.**

Surname, first name:

Address:

Phone number:

E-mail:

* 1. **Project Description, summary**, max. 1000 char. incl. blank spaces
  2. **Description of the problem definition for which financial support is required. Needs and significance of the project**
  3. **Targets and indicators**
  4. **Work plan and timeline,** display the timeline as a table or figure
  5. **Project duration in months**
  6. **Budget:** attachdetails in an Excel sheet

Human resources, local staff CHF

Project activities CHF

Material, consumables CHF

Travel expenses, food, lodging

(local staff, students) CHF

Other CHF

Total CHF

**Funding Plan:**

Requested by gynécologie suisse SGGG **CHF**

Additional financial support **CHF**

Which ones?

**Total CHF**

* 1. **Attachements:** CV from the project manager and the local project partner, support letter from partner organization or written agreement
* Signature of the Applicant/ Person authorized to represent:
* Project manager: