COVID-19 Solidarity Programme
APPLICATION FORM

I. General Information

Name of the main applicant organization	
Legal status and ID of the organization	
Legal address	
Phone number	
Region / city / communities where you work	
Organization's Website address (if any)	
Organization's Facebook or other social media page (if any)	
Budget for the last year	
Are there co-applicant organizations? If yes, please provide their information as well	
Name of the co-applicant(s) organization	
Legal status and ID of the organization	
Legal address	
Phone number	
Region / city / communities where you work	
Organization's Website address (if any)	
Organization's Facebook or other social media page (if any)	
Budget for the last year	

Which categories of closed institutions does the action cover? (please tick the relevant sectors. If other, please specify)	☐ Detention facilities ☐ Mental health institutions ☐ Other _____
Contact person (main applicant)	
Name and position	
Phone number	
Email address	

WHAT AND WHY?

Has your organization implemented any monitoring and reporting activities during and related to COVID-19? If yes, please provide a brief description and the sources of funding (*Max. 500 words*)

WHO WITH AND WHO FOR?

If the action is being implemented by a consortium, please describe the division of tasks and the cooperation process between individual organizations. (*Max. 500 words*)

Please provide an overview of the closed institutions which your proposal covers (keep in mind the number of institutions, the (approximate) number and profile of the people in the closed institutions and the number and profile of staff working in the closed institutions (*Max. 500 words*)

Please provide an outline of the specific impact of COVID-19 on the people in closed institutions in your country (*Max. 500 words*)

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Please provide an overview of the internal measures taken by your organization in a response to the COVID-19 crisis (*Max. 500 words*)

Please provide a short outline of the measures taken by the government to address the impact of COVID-19 on the closed institutions in your country (*Max. 500 words*)

IMPLEMENTATION

Please describe your monitoring and reporting process (frequency, methodology, cooperation with authorities) including the follow up process of individual reported cases (website, telephone complain form) (*Max. 1000 words*)

What could be the main challenges or risks faced during the project implementation? List at least two internal & two external challenges. How will you mitigate these risks? (*Max. 600 words*)

Challenges/risks	Mitigation activities

How will you promote the proposed project and ensure visibility of the Action? (*Max. 300 words*)

Who is the project implementation team?

Please list the names, positions and roles in the project of key members of the team and attach their CVs as part of your application. Please also indicate the number of monitors available. (*Max. 500 words*)

III. Something extra

Here, you can include any materials, links or supporting info that you think would help us understand what your organisation and project is about.

Applicant's declaration

By signing this document, I declare that:

1. The information provided in the application is true and accurate.
2. I agree that the presented data can be shared with the participant selection committee within the "COVID-19 Solidarity Programme".
3. I am ready to provide additional information for the purpose of evaluating the application.

Name:

Date _____   Signature _____