APPLICATION FORM

Asia Deaf Friendship Aid Project

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| 1. **Applicant Information** | | |
| Submission Date |  | |
| Name  of Organization |  | |
| Country |  | |
| Address  of Organization |  | |
| Telephone Number |  | |
| Fax Number |  | |
| Email Address |  | |
| URL of Web |  | |
| Establishment Day |  | |
| Information  of Organization | Number of members |  |
| Number of staffs |  |
| Type of Organization | WFD OM / WFD AM /  Others ( ) |

*If your organization is neither WFD OM nor AM, please attach an endorsement letter issued by one of WFD OMs.*

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| 1. **Contact Information** | |
| Name |  |
| Title |  |
| Post |  |
| Country |  |
| Address |  |
| Telephone Number |  |
| Fax Number |  |
| Email Address |  |

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| 1. **Project Information Form** | | |
| Project Name |  | |
| Project Time Frame | From mm /dd / yyyy To mm / dd / yyyy | |
| Project Type | *Please select one.*  One shot / Long-term | |
| Purpose of Project |  | |
| Background  of Project |  | |
| Expected Outcome |  | |
| Outline of Project |  | |
| Deliverables | Report/DVD/Publication/Photos/Film/Others | |
| Location of Project |  | |
| Budget of Project | USD / JPY |  |
| Requested Amount | USD / JPY |  |
| Desired Date of Grant | From mm /dd / yyyy To mm / dd / yyyy | |
|  |  | |

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| --- | --- | --- |
| Other Donors | USD / JPY | Amount |
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|  |  |  |
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If the requested amount is over JPY1,000,000 in the case of one-shot project or JPY500,000 in the case of long-term project, please explain the reason.

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In the case of purpose for deaf school, please give a description to explain brief outline of the school.

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Project Budget Form

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| --- | --- | --- |
| 1. **Project Revenues** | | |
| Donor’s Name | Amount  *Please select the currency unit* | |
| 1. Asian Deaf Friendship Aid Project | USD / JPY |  |
| (B) | USD / JPY |  |
| (C) | USD / JPY |  |
| Total | USD / JPY |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Project Expenses** | | | |
| 1. Asian Deaf Friendship Aid Project | | | |
| Item Name | | | Amount (USD / JPY / Local Currency)  *Please select the currency unit.* | |
|  |  | |  | |
|  |  | |  | |
|  |  | |  | |
| Sub total | | | (a) | |
| 1. Name of Other Donors | |  | | |
| Item Name | | | Amount (USD / JPY / Local Currency)  *Please select the currency unit.* | |
|  |  | |  | |
|  |  | |  | |
|  |  | |  | |
| Sub total | | | (b) | |
| 1. Name of Other Donors | |  | | |
| Item Name | | | Amount (USD / JPY / Local Currency)  *Please select the currency unit.* | |
|  |  | |  | |
|  |  | |  | |
|  |  | |  | |
| Sub total | | | (c) | |
| Project Total | | | Amount (USD / JPY / Local Currency)  *Please select the currency unit.* | |
| (a)+(b)+(c) | |

Currency Exchange Rate

1 USD / JPY = as of (mm /dd / yyyy )

Project Schedule

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| --- | --- | --- |
| Date | Location | Activities |
|  |  |  |

Project Evaluation

|  |  |
| --- | --- |
| Expected Impact of the Project |  |
| Long Term Effect of the Project |  |