**Rapid Rescue for Conservation Crises (R2C2) Facility**

**Fixed Amount Award Proposal Template**

**GENERAL INFORMATION**

**Organization Legal Name:** (legal name of organization that will sign the agreement and accept responsibility for R2C2 grant, if awarded)

**Primary Contact** (name, title, email and telephone number of person submitting the application)

**Secondary Contact** (name, title, email and telephone number of alternative contact person, if available)

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**Date of Submission:**

**Organization type:**

CEPF defines a "local organization" as one that is legally registered in the country where the project will be implemented and that has an independent board of directors or similar type of independent governing structure. CEPF defines organizations not fulfilling these two criteria as “international organizations”.

☐ Local

☐ International

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| --- |
| **Organization status:** |
| Select the most accurate description of the organization: |

[ ]  Academic/Research Institution

[ ]  Community Group

[ ]  Cooperative

[ ]  Non-governmental Organization

[ ]  Parastatal

[ ]  Private Enterprise

**ORGANIZATIONAL INFORMATION**

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| --- |
| **History and Mission Statement**Provide a brief description of your organization’s history and mission. |
|  |
| **Please describe your Organizational Structure**: include leadership structure and external governance and oversight. Where available please provide documentation (e.g. a diagram of your organizational structure; board governance/oversight mandate) |
|  |
| Total Revenue for the most recent fiscal year in Local Currency |  |
| Total Expenses for the most recent fiscal year in Local Currency: |  |
| What are the sources of the organization’s revenue? |  |
| Is there a familial relationship between anyone in your organization and a CI employee or officer? |  |

**PROJECT CONCEPT**

**Project Title:** Titles should be 10 words or less and contain the name of the country where the project will take place.

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Project Duration (months) Total Amount Requested (US$) Country/ies

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| **Project Rationale:** Describe the conservation crisis addressed by the project. Is this crisis happening now? Why does it need an urgent response? |
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| **Project Approach:** How will the project address the conservation crisis identified above? Describe the activities the project will implement.  |
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| **Organizational Strengths:** Describe why your organization is best suited to undertake this project. |
|  |
| **Implementation Partners:** Describe the organization(s) you will partner with to implement the project and their role(s) in the project. |
|  |
| **Stakeholder Engagement:** Does the project require input or cooperation from additional stakeholders? If yes, please list them and describe any relevant consultations you have had or partnership agreements you have made with stakeholders regarding the project?  |
|  |
| **Permits/Licenses:** Does your organizationrequire permits or licenses to conduct the proposed activities? **YES:\_\_ NO:\_\_** |
| If yes, please explain what permits/licenses are needed and what the status is of securing each (not started/in progress/secured) and the time period covered by each. |
| **Project Assumptions and Risks:** Describe any important assumptions and risks that may affect the project during implementation and how you will mitigate each potential risk. |
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| **Describe the assets and resources** (e.g., materials, tools, vehicles) needed to complete the project. Which of these assets are currently available to you, and which do you need to purchase or hire to complete the project? |
|  |

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| **Key Personnel:** Please complete the table for each of the project’s key employees and/or consultants |
| Name |  |
| Position |  |
| Number Years Employed with Organization |  |
| Responsibilities for Proposed Project (Describe primary role in project) |  |

**GRANT PURPOSE, MILESTONES AND ACTIVITIES**

**Purpose:** The overall objective of the project. The main result that will be achieved by the end of the project, if all Activities are implemented correctly and all assumptions met.

**Milestone:** A concrete, measurable deliverable or output that can be used to demonstrate progress towards achieving the Purpose of the project.

**Activities:** Actions taken by the grantee organization to achieve a Milestone of the project.

**Evidence of Completion:** Means by which the Milestone will be verified as having been achieved (e.g., photos, evaluation report, participant registration sheet, presentation materials, etc.).

**Completion Date:** The date when the Milestone will be achieved.

**Acceptance Criteria:** Specific conditions or requirements that must be satisfied for a Milestone to be accepted as completed by CEPF (CEPF will populate this column).

**Amount:** The budgeted cost to deliver the Milestone (CEPF will populate this column, based on the figures in the budget, below).

**Purpose of the project** (state the overall objective of the project in a single sentence)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **N°** | **Milestone** | **Activities** | **Evidence of Completion** | **Completion Date** | **Acceptance Criteria \*** | **Amount \*** |
| 1 |  | 1.1 1.2 |  |  |  |  |
| 2 |  | 2.12.2 |  |  |  |  |
| 3 |  | 3.1 |  |  |  |  |

\*CEPF will populate these columns

\*\*Add more rows if needed

**SAFEGUARD QUESTIONS**

The following questions help CEPF determine if your project triggers any social or environmental safeguards. CEPF is required to assess all applications to determine if safeguards are triggered, and if so, whether or not appropriate mitigation measures need to be included in project design and implementation. Selecting "yes" to any of the questions below will not necessarily prevent the project from being funded. For further information regarding CEPF's application of safeguards refer to [this link](http://www.cepf.net/grants/Pages/safeguard_policies.aspx). If you answer "yes" to one or more of the following questions, provide detailed information in the comments column.

|  |  |  |  |
| --- | --- | --- | --- |
| **Question (Select YES or NO)** | **Yes** | **No** | **Comments** |
| Will the proposed project support any physical construction or building? |  |  |   |
| Will the proposed project support any forestry activities? |  |  |   |
| Will the proposed project support activities in an area used or inhabited by Indigenous Peoples? |  |  |   |
| Will the proposed project involve activities that are likely to have adverse impacts on the local community? |  |  |  |
| Will the proposed project result in the strengthened management of a protected area? |  |  |  |
| Will the proposed project result in reduced or restricted access to the resources in a protected area? |  |  |  |
| Will the proposed project result in the physical resettlement of communities, households or individuals? |  |  |  |
| Will the proposed project involve use of herbicides, pesticides, insecticides or any other poison? |  |  |  |
| Will the proposed project include any activities that might impact the health or safety of project staff or other people associated with the project? |  |  |  |
| Will the proposed project involve the removal or alteration of any tangible cultural heritage (including movable or immovable objects, sites, structures and natural features that have archeological, historical, architectural, religious or other cultural significance)? |  |  |  |

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| **Grievance Mechanism:**All CEPF projects are required to establish a mechanism whereby grievances from community members and other stakeholders can be received, reported and resolved. You must include, at a minimum, the following elements:• A description of how you will inform stakeholders of the existence of the grievance mechanism (e.g., posters, signboards, public notices, public announcements) and in which languages.• Contact information for submitting grievances to your organization.• Contact information for submitting grievances with CEPF via the CI Ethics Hotline.• The following text, exactly: “We will share all grievances — and a proposed response — with the CEPF Grant Director within 15 days. If the claimant is not satisfied following the response, they may submit the grievance via the CI Ethics Hotline (toll-free telephone line: +1-866-294-8674 / secure web portal: <https://secure.ethicspoint.com/domain/media/en/gui/10680/index.html>).”Further guidance is provided at this [link](https://www.cepf.net/grants/grievance-mechanism). |
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**FIXED AMOUNT AWARD BUDGET**

Please complete the budget in *either* the table below *or* the attached Excel template (but not both). Please list expenses for each milestone separately, with each expense type on its own line. Examples are Employees, Consultants, Rent/Storage, Building maintenance/Utilities, Supplies (Office, field, etc), Hardware/Computer supplies & software, Equipment, Travel (Lodging, meals, transportation, fuel), Meetings and Special Events, Other Direct Costs, and Subgrants.

*Budget template available in Excel:*

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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Budget Item** | **Associated Activity** | **Quantity #** | **Unit Cost** | **USD $** | **Description** |
| **Milestone 1:** |  |  |  | **Sub Total:** |  |
| Consultancy 1 | e.g. Activity 1.1 |  e.g. 10 days | e.g. 200 | e.g. 2,000 | e.g. Name of the consultants, titles  |
| Consultancy 2 |  |   |  |  | Please specify details  |
| Field Supplies Type A |   |   |                                                              |  | Please specify details  |
| **Milestone 2:** |  |  |  | **Sub Total:** |  |
| Field Supplies Type C |   |   |                                                               |      | Please specify details  |
| Laptop Equipment  |   |   |                                                                |    | Please specify details  |
| **Total** |   |   |   | **##** |   |