U.S. DEPARTMENT OF AGRICULTURE FOOD FOR PROGRESS JAMAICA SPICES (JaSPICE)

ACDI/VOCA

**Grant/Subaward Application Form**

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| 1. **GENERAL INFORMATION** | | |
| 1. Name of Organization:   1b. Unique Entity Identifier: | | 1. Project Title: |
| 3. Address (State exactly where the company/farm operates or meets, include specific address, parish, district, and community name): | 4. Website:  Facebook:  Instagram:  Other | 5.Telephone & email address of Organization: |
| 6. Provide the names and titles of the three (3) top Executives of the organization.  Executive #1 | 7. Provide the names, titles, and contact information of three (3) persons who will be able to provide information on the proposed project, act as liaison between the group and U.S. Department of Agriculture Food for Progress Jamaica Spicesand sign authorized documents:  Contact Person #1: | 8a. What is the estimated total cost to complete the proposed activities for the project:  8b. Amount of total cost requested (Project Contribution):  8c. Applicants Contribution:  (Please indicate the means by which the applicant will provide this requirement. Provide contact details for institution(s) or individual(s) through which the company/farm will provide its contribution:  Cost Share:  Leverage: |
| Executive #2 | Contact Person #2: |
| Executive #3 | Contact Person #3: |
| 9a. Project Expected Duration (Months): | 9b. Projected Start Date: | 9c. Projected End Date: |
| 10a. Who are your partners/collaborators, their role and contribution? | | |
| 10b. Do you have firm commitment from customers (attach a copy, if yes) | | |
| Approximately how many persons are expected to be employed (Indicate how many males and females are expected both full and part-time as a result of this project).  Sex: Male/Females | | |
| 10c. How will the wider community benefit from the project? | | |
| 11a.Land tenure arrangements (ownership, rent, lease agreements, no objection letters signed by J.P.s, etc.): | | |

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| 1. **PROJECT SUMMARY** |
| **Project Context and Overall Objectives** *(Describe the background, identified need/problem/issue, targeted area of focus and overall objectives of your project)* |
| **Description of Project Activities and Expected Results** *(Describe the work planned, including the approach to achieving the expected main results)* |
| **Describe what is needed from the U.S. Department of Agriculture Food for Progress Jamaica Spices project:** |
| **Project Alignment to U.S. Department of Agriculture Food for Progress Jamaica Spice Overall Goals and Objectives** *(Which component will be impacted)*  **1. Increased access to quality planting material**  **2. Increased and sustainable production plus farmer resiliency**  **3. Strengthened market connections**  **4. Increased access to finance** |
| 1. **PROJECT APPROACH** |
| **Implementation Plan** *(Detailed project methodology and Gantt Chart showing high-level activities and timelines)* |
| **Risks and Challenges** *(Identify the anticipated key risks and challenges that the project may face in implementation and how these risks will be addressed)*   | **Risks/Challenges** | **Response/Strategies** | | --- | --- | |  |  | |  |  | |  |  | |  |  | |  |  | |
| **Gender, Youths & Social Inclusion, climate/environmental Considerations** *(Give details of your expected gender, youths etc. composition, climate/environmental impact and how the proposed program will take their* *particular needs into account)* |
| 1. **ORGANIZATIONAL CAPACITY** |
| **Organization Capacity** *(Describe how your organization will use its human, financial and other resources to implement the project, including the list of key personnel with relevant capacity to implement and monitor the project)* |
| **Organizational Experience** *(Describe what experiences your organization has in working in the area identified /or delivering similar projects)* |
| 1. **SUSTAINABILITY** |
| **Sustainability & Continuation** *(Describe the strategy for sustainability and continuation after funding ends, any* *possible synergies/complementarities with other activities/projects/organizations/partnerships that could reinforce the long-term sustainability of the project)* |
| 1. **OUTCOMES AND EVALUATION** |
| Provide a narrative outline of the intended outputs and outcomes of the project, indicators that will be used and how the indicators will be measured and evaluated. Use the table below to succinctly capture key activities, results, indicators and means of verification.   |  |  |  |  | | --- | --- | --- | --- | | **Key Activity** | **Expected Result** | **Indicator** | **Means of Verification** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |
| 1. **FINANCIAL MANAGEMENT**   **Budget: Complete the attached budget template (including detailed budget notes).** |
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| 1. **SUPPORTING DOCUMENTS ATTACHED** |
| **☐Registration Document/Endorsement Letter ☐Proforma Invoices**  **☐Most recent Annual Report &/or minutes of AGM/regular meetings ☐Most recent Financial Statements**  **☐Job descriptions or Terms of Reference for project personnel ☐Last Audit Report**  **☐Cash flow projection and assumptions ☐Business Plan**  **☐Land Tenure Arrangement (Titles/Lease Agreements, verified No objection letters, etc.) ☐License and Permits**  **☐Memorandum of Understanding (MOU) ☐Contract Agreements**  **☐Organizacional Chart/Articles of Incorporation ☐Other Documents** |

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| **Signature of Legally Authorized Person**  Being legally authorized to sign on behalf of the lead agency, I hereby certify that to the best of my knowledge that,   1. this application in its entirety contains only true, accurate, complete, and current information. 2. we are not in any legal dispute or pending judgment or debt that would impact our ability to implement the activity proposed in this document.   To certify the truth of this declaration, this statement is authenticated with a stamp of this organization.  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Internal Use Only**    Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reference No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The undersigned hereby certifies that: (a) the organization has received an official delivery receipt for its Grant Application, (b) a copy of that receipt has been filed, (c) a reference number has been assigned, and (d) a grant application file has been opened.  Grants Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  | | --- | |  | |