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| **Project Proposal**  **Organization Name(Applicant organization);**  **Names of multiple sub-representative organizations,(　　　　　　　　　　　　　、　　　　　　　　　　　　　　　)** |

\* Please fill it out briefly with a total length l**ess than 14 pages** in total (**font size 11** at A4 size).

**For Collaboration Grant**

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| **1. Applicant Profile**  **(Organization Name; )** |

1. **Organization**

Organization applying for the project(Listed by the representative who will collaborate to implement the project)

* 1. **Applying Organization**

Form of the organization

・Organization with legal personality；

　　Attach official document(s) proving your legal status

・Voluntary organization or group

Attach external audits of operations and accounting, if any.

・Staff number

Director

Permanent staff

Non-permanent staff

Attach an organizational Chart

Representative

・Full name

・Birth date

・Home address

・Mobile phone#

・Major accomplishment

・Other affiliations and positions.

Website URLs

* 1. **Collaborationg Organization(List the subrepresentative organizations (one or more) with whom you will collaborate on the project)**

Form of the organization

・Organization with legal personality；

　　Attach official document(s) proving your legal status

・Voluntary organization or group

Attach external audits of operations and accounting, if any.

・Staff number

Director

Permanent staff

Non-permanent staff

Attach an organizational Chart

Representative

・Full name

・Birth date

・Home address

・Mobile phone#

・Major accomplishment

・Other affiliations and positions.

Website URLs

* 1. **Other Collaborating Organization(s)** **(List the subrepresentative organizations (one or more) with whom you will collaborate on the project) (add lines if any)**

1. **Historical background**

Date: Date of foundation

History including past activities;

Indicate year, supported party, project cost, and web-site for each activity.

1. **Activities in the country implementing the project in the past, ongoing, and planned .**
2. **Financial Situation**

Attach income and expenditure statement as well as balance sheet, preferably audited, for last three fiscal years. For audited, attach the auditor's comment and signature, if any.

**2. Please indicate the expected effects (multiple outcomes) of the project implementation by the representative organization (A1) and the subrepresentative organization (A2, etc.) of the Collaboration Project.**

**3. Project objective** (Explain which GBF goal project the applies to)

Note: Please specify which target(s) your project contributes to the achievement of from the 23 targets listed as the 2030 action targets proposed in “Kunming-Montreal Global biodiversity framework (GBF) .

**4. Project implementation plan**

(Please describe the projects by year and item~~s~~.)

Note; For project, please describe not only fiscal year for which this application is being submitted but also susequent FYs.

1. 1st Fiscal Year
2. 2nd Fiscal Year
3. 3rd Fiscal Year

**5．Expected concrete activity results**

1. 1st Fiscal Year
2. 2nd Fiscal Year
3. 3rd Fiscal Year

**6. Activity schedule**

1. 1st Fiscal Year
2. 2nd Fiscal Year
3. 3rd Fiscal Year

**6. Activity schedule**

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| **Activities / Tasks** | **FY２０２６** | | | | | | | | | | | | **Remarks** |
| **Apr.** | **May** | **Jun.** | **Jul.** | **Aug.** | **Sep.** | **Oct.** | **Nov.** | **Dec.** | **Jan.** | **Feb.** | **Mar.** |
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| **Activities / Tasks** | **FY２０２７** | | | | | | | | | | | | **Remarks** |
| **Apr.** | **May** | **Jun.** | **Jul.** | **Aug.** | **Sep.** | **Oct.** | **Nov.** | **Dec.** | **Jan.** | **Feb.** | **Mar.** |
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| **Activities / Tasks** | **FY２０２８** | | | | | | | | | | | | **Remarks** |
| **Apr.** | **May** | **Jun.** | **Jul.** | **Aug.** | **Sep.** | **Oct.** | **Nov.** | **Dec.** | **Jan.** | **Feb.** | **Mar.** |
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**7. Income and Expenditure Budget plan**

Note;

1. Describe each FY.
2. Divide expenditure type into individual “Exp Item” and describe i)the total amount, ii)the amount for each funding source, and iii)calculation basis.for each. Indicate also whether each funding source is fixed or expected.
3. Add rows for Exp Item and columns for Funding Source as appropriate
4. Convert local, or US, currency into in Japanese yen.

**（１）FY 2026**

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|  | **Total Amount** | **KNCF’s Grant** | **Self Finance** | **Other Funding Souce 1** | **Other Funding Souce 2** |
| **Total** |  |  |  |  |  |
| **Exp Item 1** |  |  |  |  |  |
| **Exp Item 2** |  |  |  |  |  |
| **Exp Item 3** |  |  |  |  |  |
| **Exp Item 4** |  |  |  |  |  |
| **Exp Item 5** |  |  |  |  |  |

**（２）FY 2027**

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|  | **Total Project** | **KNCF’s Grant** | **Self Finance** | **Other Funding Souce 1** | **Other Funding Souce 2** |
| **Total** |  |  |  |  |  |
| **Exp Item 1** |  |  |  |  |  |
| **Exp Item 2** |  |  |  |  |  |
| **Exp Item 3** |  |  |  |  |  |
| **Exp Item 4** |  |  |  |  |  |
| **Exp Item 5** |  |  |  |  |  |

**（３）FY 2028**

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|  | **Total Project** | **KNCF’s Grant** | **Self Finance** | **Other Funding Souce 1** | **Other Funding Souce 2** |
| **Total** |  |  |  |  |  |
| **Exp Item 1** |  |  |  |  |  |
| **Exp Item 2** |  |  |  |  |  |
| **Exp Item 3** |  |  |  |  |  |
| **Exp Item 4** |  |  |  |  |  |
| **Exp Item 5** |  |  |  |  |  |

**Please add rows for Exp Item and add columns for Funding Source as appropriate**

**8. The name and contact information of the experts outside of applicant’s who will provive advice and guidance for the project implementation .**

Note; Attach recommendations, if any, which will be positively evaluated.

**9. Local approvals (if you need local government approvals or agreements with local residents, please describe the contents)**

Note; Attach contracts or agreement with local governments or local communities, if any, which will be positively evaluated.

**10. Partners (if you partner with a local NGO or other international organization on the projects, please list the names of the organizations)**

Note; Attach contracts or cooperative agreements with international organizations or NGOs, or recommendations concerning your project from the partner, if any, which will be positively evaluated.

**11. Japanese Introducer (Name and contact information)**

Note; Japanese Introducer must be residing in Japan, and is someone who will be able to explain about the project when contacted by KNCF. Japanese Introducer does not need to contact KNCF for reasons other than answering questions.

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| Send materials to the following address only if data cannot be sent by email. Note that submitted materials will not be returned.  【Postal Mail Address】 1-3-2, Otemachi, Chiyoda-ku, Tokyo 100-8188, JAPAN Keidanren Nature Conservation Council |