



Embassy
of the Federal Republic of Germany
Port-of-Spain

Application for financial support in implementing a micro-project
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1) **Applicant institution**

Name: _____

Address: _____

Telephone: _____

Fax: _____

E-mail: _____

2) **Legal form of applicant, year of establishment, number of members**

3) **Responsible contact persons (Name, e-mail, address)**

4) **Project title**

(a) Short description of project (please provide full documentation if possible):

(b) Development-policy objective of the project (if applicable also with a view to tangibly improving women's lives in the area):

- 5) (a) Finance plan enclosed? Yes No
- (b) Proforma invoices enclosed? Yes No
- (c) Is overall finance guaranteed? Yes No

- 6) (a) Amount applied for in (local currency):
- (b) Own funds and possible third-party funds:
- (c) Total expenditure of project:
- (d) Other contributions by applicant to project implementation (e.g. work, land or buildings):

(e) Probable follow-up costs:

(f) Follow-up costs can be financed by applicant
or third party:

Yes No

7) Project has not yet commenced
 commenced on _____ .

8) (a) Project start: _____
(b) Project end: _____

9) Have you applied for or received any other public funds for this project?
 Yes No
If so, from what institution and how much?

(place, date, institution stamp/seal)

(signature of two responsible persons)