



U.S. CONSULATE CHENNAI GRANTS PROGRAM

SUGGESTED APPLICATION FORMAT

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| 1. GENERAL INFORMATION | | | |
| 1.1 Applicant Organization | | | |
| a. Organization (English): | | | |
| b. Organization (Original): | | | |
| c. Address | d. City/Town | e. District | |
| f. Website | g. Tax Code | | |
| h. Other | | | |
| 1.2 Organization Leader | | | |
| a. Last Name: | | b. First Name: | |
| c. Tel: | d. Cell: | E. E-mail | d. Fax |
| 2. BACKGROUND OF ORGANIZATION | | | |
| 2.1 Description | | | |
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| 2.2 Past Grants (U.S. Embassy, Department of State) | | | |
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| 2.3 Past Grants (Other) | | | |
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| 3. PROJECT DESCRIPTION | | | |
| 3.1 Project Information | | | |
| a. Project Name: | | | |
| b. Duration (months): | c. Start Date (mm/dd/yy): | d. End Date (mm/dd/yy): | |
| 3.2 Project Justification | | | |
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| 3.3 Project Goal and Objectives | | | |
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| 3.4 Project Activities | | | |
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| 3.5 Monitoring and Evaluation | | | |
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| 3.6 Key Personnel | | | |

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| 3.7 Project Partners |
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| 3.8 Strengths and Innovation |
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| 3.9 Sustainability |
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| 4. BUDGET |
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| 4.1 Budget Summary |
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| Category | Description/Details | Requested (US \$) |
|---|---------------------|-------------------|
| Personnel | | |
| Fringe Benefits | | |
| Travel | | |
| Equipment | | |
| Supplies | | |
| Contractual | | |
| Other Direct Costs | | |
| Indirect Costs | | |
| Total Requested | | |
| Contributions from other partners (including in-kind support) | | |
| Project Total | | |

Note: You may be asked to submit a detailed budget in a spreadsheet format

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| 4.2 Budget Narrative |
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| 4.3 Miscellaneous |
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