United States Embassy
P.O. Box 1014
Addis Ababa, Ethiopia

Dear Special Self-Help Program Applicant:

Thank you for your interest in the assistance of the United States Embassy in achieving the goals of your project. The Ambassador's Special Self-Help Program (SSHP) provides financial assistance to community-initiated activities in Ethiopia that **promote self-reliance and foster development** in the areas of gender, disability, education, health, water and sanitation, the environment, skills-building and income generation, among others.

Projects selected for Special Self-Help funding:

- Are initiated by the community or village, and benefit residents by increasing income or improving living conditions.
- Are sustainable and do not require continued outside support after the one-time contribution from the SSHP.
- Require substantial community contributions in the form of cash, labor or materials.
- Are completed within one year.

The maximum award for funded projects is USD 12,000, and most Self-Help grants are between USD 5,000 and 10,000. All grants are "one-time only."

SSHP accepts applications until May 31 of this year, to be funded during the following U.S. fiscal year, beginning October 1st and ending September 30th. Applications arriving by May 31st will be placed in consideration for funding, and successful applicant will be notified before September 30th.

Please review the criteria noted above as well as in *Frequently Asked Questions about the Ambassador's Special Self-Help Program*, and consider carefully whether your project qualifies. If so, please complete the attached application form, and answer each question as carefully and as fully as you can. Please return the enclosed application, and attach a full proposal, if needed, with pro-forma invoices for all products and services you are requesting to purchase as well as a copy of your organization's license or permit.

Thank you again for your interest in the SSHP and best of luck in your endeavors.

Sincerely,
Small Projects Office
U.S. Embassy, Addis Ababa

Attachment

**Ambassador's Special Self-Help Program**

**U.S. Embassy Addis Ababa**

**You may submit application by postal mail, email or in person:**

Small Projects Office, U.S. Embassy, P.O. Box 1014, Addis Ababa, Ethiopia

Telephone: 011130-6152/6533
Fax: 011-124-2431

Email Application submissions to: **ET-SG-SSHP@state.gov**

Questions? Email: WoznyJP@state.gov or TesfayeMT@State.gov

## GRANT APPLICATION SUMMARY SHEET

(Complete and attach to proposal)

**Organization Name**: _____

**Town:** _____ **Woreda:** _____**Region:** _____ **P.O. Box:** _____

**Contact Person:** _____**Title:** _____

**Telephone:** _____ **Fax:** _____ **E-mail**: _____

**Project Title:** _____

**Project Location (town, woreda and region):** _____

**Amount of U.S. Embassy Request:** _____

**Total Project Budget:** _____

**Community Contribution (e.g., cash, labor, materials):** _____

_____

**Has your organization begun working on the project?** ____ **Yes** _____ **No**
If yes, please attach a photo illustrating the work already completed.

**Has your organization applied previously for Special Self-Help funds?** ____**Yes** _____ **No**
If yes, provide the name of the project, the year applied and the result of the request:

_____

**Project Summary:** Provide a brief summary of the project for which you are applying for funding. Please be sure to detail what *specific* problem or need your project will address.

_____

_____

_____

# Ambassador's Special Self-Help Program

## APPLICATION FOR ASSISTANCE

Please complete fully, attach pro-forma invoices for all items requested, and return by mail, or email.

1. **Applicant Organization**

Name: _____

Town: _____

Woreda: _____

Region: _____

P.O. Box: _____

Contact Person: _____

Telephone: _____

Email: _____

2. **Project Title:** What is the name of the project?

3. **Location:** In which town, woreda and region will the project be implemented?

4. **Type:** What is the type of project for which are you seeking U.S. Embassy assistance (e.g., school construction, potable water development, income generation)?

5. **Purpose:** What will the project accomplish?

6. **Rationale:** What problem or need will the project address? Please be sure to clearly state the problem that requires your intervention and how you will mitigate and/or alleviate it. Also include how your community will be involved in implementation.

7. **Objectives:** What are the project's objectives? All objectives should be **SMART** (i.e., **S**pecific, **M**easurable, **A**chievable, **R**ealistic and **T**imed).

8. **Activities:** What do you intend to do to accomplish your objectives? Please list the activities in the order in which they will be implemented. What work has already been done (e.g., foundation laid, walls built to window level, revenue raised)? **Please attach a photo illustrating the work already completed. Remember: there should be a direct relationship between the activities and the budget items described in Item 19.**

9. **Timeline:** When did work on the project begin or when do you anticipate it beginning? What is the estimated time it will take to complete the project?

10. **Beneficiaries:** How many and what populations of people (e.g., women, the disabled, street children) will benefit from the project?

    Direct beneficiaries: male ____ female____

    Population(s): _____

    Indirect beneficiaries: male ____ female____

    Population(s): _____

11. **Expected Outcomes:** In what ways will the beneficiaries' lives change or improve as a result of the project? How will you know the intended change or improvement has been achieved?

12. **Engagement of Stakeholders:** What stakeholders (e.g., beneficiaries on whose behalf your NGO is applying for funds, woreda administration) need to be engaged to ensure the project's success? How will you involve them? Please attach letters of support or commitment from your intended stakeholders.

13. **Support/Commitment Letters:** If you are proposing to build a school or health facility, or develop a water source, please attach a letter of support from the appropriate woreda office (e.g., education office, health office or water resource office).

**14.** **Challenges:** What potential challenges will you face in implementing the project? How will they be addressed?

**15.** **Sustainability:** Once it is completed, what will be done to ensure the project continues to provide its intended impact? Will the involvement of professional or technically-trained individuals be required to sustain the project results? If so, please list them and describe how you will employ them. Is it fully understood that any U.S. Embassy contribution to this project will be one-time only?

**16.** **U.S. Embassy Contribution Requested (in U.S. dollars):** Please state the amount you are requesting in U.S. dollars. When calculated in Birr, this figure should be the same as the total amount requested in Item 19.

**17.** **Community Contribution:** What contributions of cash, labor or materials will the community and/or beneficiaries make to the project (e.g., 20 hours of volunteer labor per week, 50 bags of cement, 20,000 Birr)? Please provide estimates of current market prices of your in-kind contribution.

**18.** **Detailed Description:** Provide an exact and detailed description of the specific items for which the funds will be used. Include specifications of size and structure (e.g., 6' x 8' room, poured concrete with aluminum roofing sheets). Also include sketches or drawings of any buildings on a separate sheet. Formal blueprints are not required.

**19.** **Project Budget (in Ethiopian Birr):** Please list all items to be purchased with the assistance given and **state the expenses in Birr**. Your project can only be considered for funding **if you provide pro-forma invoices for all products and services requested.** Make sure the amount requested equals the total cost of the pro-forma invoices. Use a separate sheet if necessary. **Remember: there should be a direct relationship between the activities you describe in Item 8 and the budget.**

| Item | Unit of Sale | Price per Unit (Birr) | Quantity | U.S. contribution | Community Contribution | Total Price |
|---|---|---|---|---|---|---|

| | | | | | | |
|---|---|---|---|---|---|---|
| | | | | | | |
| *Example:* Cement | 50 kg. | (300) Birr | 10 | (3000) Birr | 300 Birr | 3300 Birr |
| | | | | | | |
| | | | | | | |

Total Amount Requested: _____

*Note: Expenses that fall outside the project activities will not be covered.*

**20.** **Background of Applicant Organization:** What are your organization's objectives? When was your organization legally established? Who are your members? How does this project fit with your objectives?

**21.** **Capacity of Applicant Organization:** What other community-based development projects has your organization implemented? How have they improved the community?

**22.** **Project Leadership:** Who will be the person responsible for ensuring completion of the project? What are his/her qualifications?

**23.** **Past U.S. Embassy Assistance:** Has your organization applied previously for Self-Help funding? If so, give the name of the project, the year applied and the result of the request.

**24.** **Other Assistance:** Have you applied to other embassies or organizations for assistance with this project? If so, please list them and give the results of the request.

**25.** **Record Keeping:** Will records be kept for at least three years and be made available for inspection?

26. **Project Monitoring:** Will representatives of the U.S. Embassy be permitted to observe your activities (e.g., construction of new classrooms) or view your newly-purchased equipment (e.g., woodworking machine) in order to assess project performance?

27. **Responsibilities of Applicant Organization:** Do you agree to be responsible for all expenses that fall outside the project activities? Do you agree to handle all arrangements and logistics related to project implementation (e.g., transporting a grinding mill from Addis Ababa to the project site)?

28. **Maintaining Contact:** If your address, telephone number or email address changes, will you immediately provide the new information to the U.S. Embassy?

29. **Submission of Receipts:** Do you agree to provide the U.S. Embassy with original receipts for all funds received? **Submission of original invoices and receipts is extremely important for accounting purposes.**

30. **Ethiopian Government Involvement:** What is the role, if any, of the Ethiopian Government in this project?

31. **Legal Status:** Please attach a certificate of registration and an operational agreement from the Charities and Societies Agency (required). If your organization has not obtained these documents, please state why.

**Name of person completing this form:** _____

**Signature:** _____ **Date:** _____