**Project Proposal**

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**Reference number:**

**Issue Date:**

**Place for lodgments:**

**[COMPANY NAME HERE]**

**Company street address here**

**City State, Zip Codes**

**123-456-7890, 111-222-3333**

**www.email123@email.com**

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# PROJECT DESCRIPTION

* + Project Title: (PROJECT TITLE)

Type of Project: (education-training/ health-medical mission/ arts exhibit, etc.)

* + Project Proponent/s: (Name of organization)
  + Number of Beneficiaries: (no. of households and individuals)
  + Project Beneficiaries: (Urban poor, women, youth, etc.)
  + Location of Beneficiaries: (address of beneficiaries)
  + Date of Implementation/Duration: (Start date/number of implementation days)
  + Area of Project Implementation: (address where project was implemented)
  + Budget Requirement: (overall amount of budget requirement)
  + Budget Requested: (state amount requested)

# BACKGROUND/SITUATION ANALYSIS

* What prompted the project?
* Is there an existing concern or potential problem that you want to address?

# PROJECT OBJECTIVES

|  |  |
| --- | --- |
| **OBJECTIVES** | **STRATEGIES** |
| What does the project hope to achieve? | What are the strategies that must be done to meet the objectives? |

# DESIRED IMPACT AND OUTCOME OF THE PROJECT

* + What are the long-term effects of the project? (Economic, social, cultural, institutional, environmental, technological, etc.)
  + What are the specific measures to sustain the project?
  + What are the linkages with other initiatives or reforms in the sector and other development or governance concerns?

# RISK MANAGEMENT PLAN

* What are the risks and factors that may hamper or hinder the successful implementation of project activities and achievement of project outputs?
* What are the measures that would mitigate the adverse effects resulting from such risks?

# PROJECT ORGANIZATION AND STAFFING

|  |  |  |  |
| --- | --- | --- | --- |
| **Office/Staff Designated** | **Responsibilities** | **Contact Person** | **Contact Details** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# PROJECT WORK PLAN

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PHASES OF THE PROJECT (DATE)** | **ACTIVITIES** | **OUTPUT / TARGET** | **INDICATORS** | **PERSON IN CHARGE** | **RESOURCES NEEDED** | **COST** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

***\*\*****Note: Include Gantt chart if possible*

# DETAILED BUDGET REQUIREMENT

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Line Item** | **Description** | **Amount Needed** | **Proposed Source/s** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# OTHER RELEVANT INFORMATION

May include any other information that will support the request for funding, such as:

* Brief enumeration of other stakeholders who pledged support to the project
* Other projects that are lined-up to complement the current initiative.

# ATTACHMENTS

* Profile/brochure of the organization
* Endorsement and recommendation letters
* Other documents to support the request