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| **GRANT AWARD PROCEDURE**  **Stage one** |
| **CONCEPT NOTE**  **(APPENDIX I)** |

Call for proposals “Local initiatives on anti-corruption and public integrity”

8668-2021-07

**HOW TO COMPLETE THE CONCEPT NOTE?**

Complete each box with the information requested. The size of the box will adapt to the volume of text typed. Note the text length requirement outlined in the description of each section.

Once all fields are completed, print the Application Form, sign it, and send it in accordance with the requirements of the Call for Proposals.

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| **1. Applicant** | |
| Official name ► |  |
| Full address ► |  |
| Internet site (if any) ► |  |
| Date on which the applicant was founded ► |  |
| Name(s) of the person(s) entitled to enter into legally binding commitments on behalf of the applicant (indicate name(s) and position(s)) ► |  |
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| **2. Contact details** | |
| Contact person ► |  |
| Position of the contact person ► |  |
| Email address ► |  |
| Phone number ► |  |

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| **3.** **Project overview** Please provide a description of the project as follows: | |
| Title ► | Click here to enter text. |
| Anticipated duration ► (*maximum six months in the period December 2021 – May 2022)* | Click here to enter text. |
| The purpose and objective(s) ► | Click here to enter text. |
| Community of Practice recommendation to be addressed ► | Click here to enter text. |
| Partner institution/organisation ► | Click here to enter text. |
| Target groups and beneficiaries ► | Click here to enter text. |
| Estimated Budget ► | Total amount in AMD: |
| Soft component (amount and percentage of the overall budget): |
| Hard component (amount and percentage of the overall budget): |

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| **4.** **Problem analysis (maximum ½ page)** | |
| What are the main challenges local elected leaders are facing in performing their roles and responsibilities in your community? Describe the existing problems in your community that you want to tackle with the project ▼ |
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| **5. Project description (maximum 1 page)** |
| Describe the significance of the proposed project at local level and describe the plan to improve the situation. Explain how the proposed intervention relates to/part of/contributes to any of the deliverables of the Community of Practice. This section should include a short purpose, objectives and expected results, as well as mention the activities to be implemented ▼ |
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| **Declaration** |
| By signing this form I, the undersigned, authorised to represent the Grantee/Consortium, hereby certify that the information contained in this application is correct and that the applicant organisation has not received or applied for any other Council of Europe funding to carry out the action which is the subject of this grant application.  I also certify on my honour that the applicant organisation or their owner(s) or executive officer(s) are not in one of the situations which would exclude it from taking part in a Council of Europe grant award procedure, and accordingly declare that the applicant:  a. has not been sentenced by final judgment on one or more of the following charges: participation in a criminal organisation, corruption, fraud, money laundering, terrorist financing, terrorist offences or offences linked to terrorist activities, child labour or trafficking in human beings;  b. is not in a situation of bankruptcy, liquidation, termination of activity, insolvency or arrangement with creditors or any like situation arising from a procedure of the same kind, or is not subject to a procedure of the same kind;  c. has not received a judgment with res judicata force, finding an offence that affects its professional integrity or constitutes a serious professional misconduct;  d. does comply with its obligations as regards payment of social security contributions, taxes and dues, according to the statutory provisions of the country where it is established;  e. is not and neither likely to be in a situation of conflict of interests. |

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| **Signature** | |
| Complete the table below and sign in the last box:  **GRANTEE:** | |
| First Name and Name of the Signatory ► |  |
| Title or position of the Signatory in the applicant organisation ► |  |
| Place and date of signature ► | **Done in:** |
| **On:** |
|  |  |
| Signature and official stamp of the applicant organisation ► |  |