



# FEED THE FUTURE

The U.S. Government's Global Hunger & Food Security Initiative

## Cross-border Community Resilience (CBCR) Activity

### Request for Concept Notes No. CBCR-CN-011-2024.

**Issuance Date:** 16<sup>th</sup> December 2024

Questions due by: **05:00 PM EAT** on **20<sup>th</sup> December 2024**, submitted through email [grants@cbcrresilience.com](mailto:grants@cbcrresilience.com)

CBCR will respond to the questions by **05:00 PM EAT**, on **27<sup>th</sup> December 2024**.

Concept Notes must be submitted no later than **05:00 PM EAT**, on **3<sup>rd</sup> January 2025**.

Dear Applicant:

*The Cross-border Community Resilience (CBCR) Activity*, implemented by Chemonics International and ACDI-VOCA, is seeking Concept Notes for implementing activities aimed at strengthening the resilience of girls, women, boys, and men in the cross-border regions of Karamoja, Mandera, and Moyale Clusters, with the goal of reducing incidents of gender-based violence (GBV) and improving access to sexual and reproductive health (SRH) services.

The grants will be awarded and implemented in accordance with USAID and US Government regulations governing grants under contracts and CBCR's internal grant management policies.

Project and Chemonics employees may not ask for, and applicants are prohibited from offering any money, fee, commission, credit, gift, gratuity, thing of value, or compensation to obtain or reward improper favorable treatment regarding this solicitation. Any improper request from a project employee should be reported to the chief of party or [BusinessConduct@chemonics.com](mailto:BusinessConduct@chemonics.com).

Annexes included with this Concept Note:

- **Annex A** – Grant Concept Note Template
- **Annex B** – Grant Application Budget (Excel version attached)
- **Annex C** – Implementation Timeline
- **Annex D** – Mandatory and Required As Applicable Standard Provisions
  - Standard Provisions for Non-U.S. Nongovernmental organizations receiving a fixed amount award can be accessed through the following URL: <https://www.usaid.gov/sites/default/files/documents/303mat.pdf>



- Standard Provisions for Non-U.S., Nongovernmental recipients receiving all other types of grants can be accessed through the following URL: <https://www.usaid.gov/sites/default/files/documents/303mab.pdf>

## SECTION I. PROGRAM DESCRIPTION

### IA. BACKGROUND

CBCR is a five-year Activity financed by USAID and implemented by Chemonics International and ACDI-VOCA in collaboration with local organizations. The Activity is designed to enhance resilience and thus reduce the need for humanitarian assistance among communities in the cross-border clusters of Karamoja, Moyale and Manderla. Focusing on communities that live across the borders of Ethiopia, Kenya, Uganda, South Sudan and Somalia, the Activity aims to empower local entities, including communities, civil society, private sector, and governments, to chart their own pathways for addressing conflict, improving livelihoods, and/or reducing the risks of shocks and stresses. CBCR is working to foster local ownership of development investments by supporting local leadership in work planning, implementation, and monitoring. CBCR’s approach focuses on five integrated components:

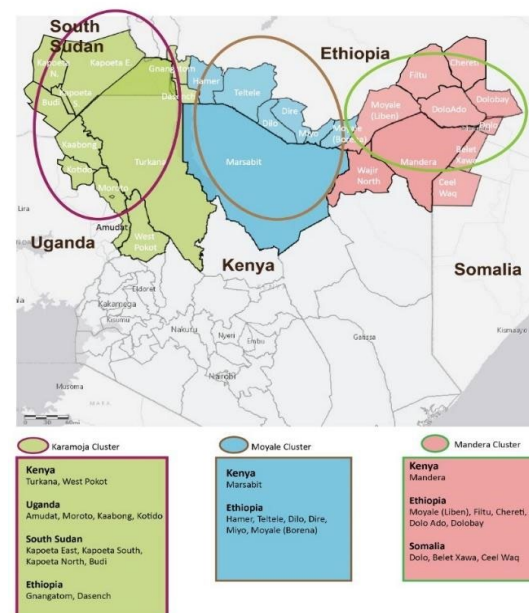
- Sub-purpose 1: Build capacity for locally led and managed programming
- Sub-purpose 2: Strengthen social cohesion as a foundation for resilience programming
- Sub-purpose 3: Expand conflict-sensitive and inclusive livelihood & employment opportunities in cross-border areas
- Sub-purpose 4: Improve conflict-sensitive management and equitable sharing of natural resources in cross-border areas
- Sub-purpose 5: Enhance collaboration and learning across all activities and investments inclusive of cluster stakeholders

CBCR is focusing on the following countries:

- Karamoja Cluster 1 includes Uganda, Ethiopia, South Sudan, and Kenya;
- Moyale Cluster 2 includes: Kenya and Ethiopia;
- Manderla Cluster 3 includes Somalia, Ethiopia, Kenya

### IB. PROBLEM STATEMENT

The cross-border areas of Kenya, Uganda, South Sudan, Ethiopia, and Somalia face high rates of gender-based violence (GBV), driven by conflict, displacement, cultural practices, and inadequate law enforcement. These challenges are compounded by systemic barriers such as unequal access to services, weaknesses in delivering integrated, people-centered healthcare, and inadequate human resources for healthcare delivery. These issues undermine the sexual and reproductive health rights of women, girls, and vulnerable populations.



Countries in the region also continue to face challenges within their health systems, which hinder the delivery of quality healthcare services to communities. These challenges affect critical areas such as TB screening and service delivery. As a result, many youths and adolescents are at risk of early pregnancies, sexually transmitted infections (STIs) including HIV, and complications from unsafe childbirth.

GBV and the lack of SRH services in these regions results in numerous social challenges, including:

- **Education Disruption:** Survivors often drop out of school due to stigma, trauma, or pregnancy, limiting future opportunities.
- **Health Complications:** Survivors frequently face reproductive health challenges, including complications from unsafe abortions and limited access to family planning services.
- **Economic Inequality:** Women affected by GBV are often denied economic opportunities, perpetuating poverty and dependency.
- **Conflict and Insecurity:** Ongoing instability exacerbates the vulnerability of women and girls to GBV, with limited law enforcement and protective mechanisms.
- **Lack of Psychosocial Support:** Cultural norms often hinder access to structured psychosocial support, impeding recovery for survivors.
- **High maternal mortality and morbidity rates:** These are primarily driven by limited access to healthcare services and harmful traditional practices, such as home births without skilled attendants.
- **Risk of sexually transmitted infections (STIs):** Barriers to reproductive health information and services, particularly among adolescents and youth, significantly contribute to the risk of STIs.
- **Low usage of modern contraceptives:** Family planning remains a challenge for many women in the region due to cultural norms and practices, with nearly two-thirds of women of reproductive age not utilizing modern contraceptive methods.

In many borderland areas, harmful practices such as wife battering, female genital cutting, marriage by abduction, and early or forced marriages are widely accepted. Access to health services remains limited due to a lack of information, negative perceptions of sexual and reproductive health, cultural restrictions, feelings of shame, and the absence of privacy, confidentiality, and essential services. Girls and women encounter varying forms of GBV throughout their lifecycles, and health systems, despite being crucial points of contact, often fall short of providing effective responses.

The region also faces alarmingly high maternal mortality and morbidity rates, high rates of HIV infections, and low use of modern contraceptives, with cultural norms and practices serving as significant barriers. Nearly two-thirds of women of reproductive age are not using modern contraceptives. Challenges within health systems, including inadequate infrastructure and resources, further hinder the delivery of quality care to these communities. In addition, in the border counties of West Pokot and Turkana in Kenya, and the neighboring regions of the Karamoja district in Uganda, the prevalence of GBV remains alarmingly high. Approximately 42%<sup>[1]</sup> to 45%<sup>[2]</sup> of women aged 15-49 have experienced some form of GBV in the bordering area of Karamoja region. These statistics underscore the critical and pervasive nature of GBV in these regions.

The situation in South Sudan, Ethiopia, and Somalia border areas is more dire, with prevalence rates of 60% and 58%, respectively<sup>[3]</sup>. According to different surveys conducted in the region, the contributing factors include cultural norms, economic instability, lack of access to education, inadequate healthcare infrastructure, and negative effects of climate change. Maternal mortality rates in these regions are alarmingly high, with rates ranging from 450 to 800 per 100,000 live births. Furthermore, female genital mutilation (FGM) and early marriage are prevalent, with rates as high as 90-100% for FGM and 45-70% for early marriage. For Instance, young female laborers from Ethiopia crossing to Kenya and Somalia in the Mandera cluster face challenges of exploitation and harassment. These groups are not protected because they lack legal documents and are hence threatened by their employees or young male counterparts. In early February 2024, six young Ethiopian were Killed in Bulhawa by unknown people. The incident created misunderstanding between Kenyan, Ethiopian and Somalia local authorities. Reports of these GBV-related cases in the cluster remain uncovered, hence, victims surviving in a trauma situation and threats. So far, no assessment of these specific GBV cases has been reported or published

### **IC. OBJECTIVE**

CBCR is awarding grants to local organizations in Karamoja, Moyale, and Mandera clusters to reduce the incidence of gender-based violence (GBV), improve access to GBV response services, and improve sexual and reproductive health (SRH) outcomes for cross-border communities.

This initiative aims to enhance the accessibility of health services for GBV survivors, especially women and young adolescent girls, while fostering knowledge and promoting positive social behavior change within these communities.

GBV prevention and response, along with SRH service delivery, will contribute to CBCR's second objective: strengthening social cohesion to enhance cross-border community resilience. The proposed programs in this concept note aims to achieve impactful results by fostering linkages essential for disaster risk mitigation and improving reproductive health outcomes for women, men, girls, and boys. Additionally, the integration of information dissemination and economic empowerment will directly benefit gender-based violence prevention and the promotion of sexual and reproductive health rights. CBCR will employ systemic and transformative approaches to ensure meaningful progress in these preventive and responsive initiatives.

### **ID. DETAILED PROGRAM DESCRIPTION**

CBCR invites Local Development Organizations (LDOs) operating in the target cross-border clusters to identify and implement initiatives addressing the high prevalence of gender-based violence (GBV) and the limited access to sexual and reproductive health (SRH) services in these regions. The program emphasizes raising community awareness of GBV and SRH, empowering survivors economically, and improving access to essential health services.

Through strengthening community structures, enhancing the capacity of health workers, and creating safe spaces, CBCR aims to foster sustainable transformation within these communities. This initiative adopts a holistic approach that integrates behavioral change, economic empowerment, and improved healthcare access, working in close collaboration with local stakeholders, advocacy groups, and service providers.

LDOs are encouraged to be creative and responsive to the community's needs in formulating grant program ideas in response to the concept note. See below an illustrative list of activities. CBCR is encouraging LDOs to present other related activities that suit their respective context and mandate and that also fit under this Concept Note broad program goals as detailed below:

### **Result 1: Reduce Incidences of GBV in the Cross-Borders regions**

The primary objective of CBCR's intervention is to reduce incidents of gender-based violence (GBV) by fostering knowledge and encouraging behavioral change within cross-border communities. This goal will be pursued through the following activities:

- Conduct a baseline assessment to evaluate the current situation, establish benchmarks, and refine target indicators. Map stakeholders, facilities, and GBV hotspot areas across all clusters. An endline assessment will also be conducted to confirm outcomes and assess the effectiveness of the activities implemented.
- Building the capacity of advocacy actors and law enforcement on GBV and SRH, promote community awareness through education sessions, and support radio programming on these topics.
- Facilitate economic empowerment initiatives for GBV survivors in key hotspot areas across the three clusters.
- Establish or revitalize cross-border GBV and SRH change agent networks in hotspot areas to strengthen partnerships and coordination platforms.
- Promote safe spaces within existing community institutions to provide support and protection for GBV survivors.

### **Result 2: Improve Access to GBV and SRH Care Services for Cross-Border Communities**

The second objective of CBCR's intervention is to improve access to gender-based violence (GBV) and sexual and reproductive health (SRH) services, particularly for vulnerable groups such as adolescents, young mothers, and GBV survivors. This objective will be achieved through the following activities:

- Training health workers to provide GBV and SRH support at community and village levels.
- Integrating GBV and SRH services into primary health care at strategic facilities in hotspot areas.
- Ensuring adolescents and young mothers receive holistic, youth-friendly care packages through targeted health facilities.

CBCR will report to USAID the following performance indicators. Each applicant should ensure the proposed activities are aligned with the indicators listed below.

Indicator
Number of people reached by a USG-funded intervention providing GBV services (e.g., health, legal, psycho-social counseling, shelters, hotlines, other)
Number of cross-border community systems strengthened to address GBV and SRH
Number of health workers, educators, and volunteers trained to provide health services
Number of young women and adolescents accessing SRH services (facility records/data)

### IE. AUTHORITY/GOVERNING REGULATIONS

CBCR grant awards are made under the authority of the U.S. Foreign Affairs Act and USAID’s Advanced Directive System (ADS) 302.3.5.6, “Grants Under Contracts.” Awards will adhere to guidance provided under [ADS Chapter 303](#), “Grants and Cooperative Agreements to Non-Governmental Organizations” and will be within the terms of the USAID Standard Provisions as linked in the annexes, as well as the CBCR grants procedures.

ADS 303 references two additional regulatory documents issued by the U.S. Government’s Office of Management and Budget (OMB) and the U.S. Agency for International Development:

Full text of 2 CFR 200 can be found at [http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200\\_main\\_02.tpl](http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl) and 2 CFR 700 at <http://www.ecfr.gov/cgi-bin/text-idx?SID=531ffcc47b660d86ca8bbc5a64eed128&mc=true&node=pt2.1.700&rgn=div5>. CBCR is required to ensure that all organizations receiving USAID grant funds comply with the guidance found in the regulations referenced above, as applicable to the respective terms and conditions of their grant awards.

Under the CBCR grant program, USAID retains the right to terminate, in whole or in part, CBCR grant-making authorities.

### SECTION II. AWARD INFORMATION

CBCR anticipates awarding two LDOs in each cluster of Karamoja, Mandera, and Moyale; with each grant award being USD 90,000 equivalent to the local currency, but the final amount will be dependent upon grant activities and final negotiation and may be lower or higher the amount stated. The duration of any grant award under this solicitation is expected to be no more than one year. The estimated start date of grants awarded under this solicitation is March 2025.

### SECTION III. ELIGIBILITY



- Applicants must show proven expertise, funding, and past experience in SRH and GBV.
- Applicants must show proven expertise in implementation of SRH and GBV programming in the cross-border areas or capacity to implement.
- Applicant must show proven expertise in gender-based advocacy work in the cross-border communities.
- Applicant must show experience in working with health facilities, preferably cross-border facilities.
- Applicants must show experience in implementing outreach programs in the cross-border areas.
- Applicants must show the capacity to implement programming for youth and adolescent girls.
- Applicants must be from Karamoja, Mandera, and Moyale clusters only.
- Applicants must be a legally registered from the following countries within Karamoja, Mandera, and Moyale clusters; Kenyan, Ethiopian, Ugandan, South Sudanese, or Somalia entity and formally constituted, recognized by and in good standing with appropriate authorities, and compliant with all applicable civil and fiscal regulations.
- Applicants may only submit *one* application per organization under this Concept Note.
- Applicants must specify the Cluster or area of focus in the concept note within the five corridors of Karamoja (*Amudat-Kacheliba, Moroto-Loima-North Pokot, Nyagatom-Dassanech-Turkana, Oropoi-Kaboong-Kotido, and Kapoeta, Lokichoggio*), five corridors of Mandera Cluster (*mandera-Beledhawa-Suftu, Dollo Ado-Dollo, Rhamu-Sadel/Boqolmayu, Banisa-malkamari-Mubarak, and Elwak Kenya-Elwak Somalia*), and four corridors of Moyale cluster (*Dukana-Dilo, Forolle-Dirre, Sololo-Miyo, And Moyale-Moyale*) under this Concept Note.
- Applicants must demonstrate successful past performance in implementing integrated development programs related to CBCR priority areas.
- Applicants must have established outreach capabilities with links to the beneficiary group(s) identified in the program description. This should be reflected by the incorporation of the beneficiary perspective in the application.
- Applicants must display sound management in the form of financial, administrative, and technical policies and procedures and present a system of internal controls that safeguard assets; protect against fraud, waste, and abuse; and support the achievement of program goals and objectives. *CBCR* will assess this capability prior to awarding a grant.
- Applicants must sign certain required certifications prior to receiving a grant. The certifications will be shared as part of the agreement and *CBCR* will review them with applicants.
- For any grant award(s) resulting from this solicitation that is other than in-kind, equivalent to \$25,000 USD or more, and has no anticipated subawards, grantees will be required to provide a Unique Entity Identifier (UEI) at the time of award. If the applicant already has a UEI number, it should be included in their application. Otherwise, applicants will be expected to get a UEI number before an award is made. *CBCR* will assist successful applicants with this process.
- The project will work with the successful grantee to draft a marking and branding plan which will be annexed to the grant agreement.
- Faith-based and community groups will receive equal opportunity for funding in accordance with the mandated guidelines laid out in ADS 303.3.28 except for faith-based organizations whose objectives are for discriminatory and religious purposes, and whose main objective of the grant is of a religious nature.



## SECTION IV – CONCEPT NOTES AND SUBMISSION INFORMATION

### IVA. INSTRUCTIONS TO APPLICANTS

Applicants must propose strategies for implementing the program described above, introducing innovations appropriate to their organizational strengths, focusing on Karamoja, Mandera and Moyale clusters only.

#### IVA1. GRANT CONCEPT NOTES

Templates to be utilized when developing Concept Notes are provided in Annex A. Applicants shall present their technical Concept Notes in the formats provided and shall follow the instructions and guidelines listed in these annexes.

All grant activity costs must be within the normal operating practices of the Applicant and in accordance with its written policies and procedures. For applicants without an audited indirect cost rate, the budget may include direct costs that will be incurred by the Applicant to provide identifiable administrative and management costs that can be directly attributable to supporting the grant objective.

The Concept Notes must be signed by an authorized agent of the Applicant.

#### IVA2. INELIGIBLE EXPENSES

CBCR grant funds may not be utilized for the following:

- Construction or infrastructure activities of any kind.
- Ceremonies, parties, celebrations, or “representation” expenses.
- Purchases of restricted goods, such as: restricted agricultural commodities, motor vehicles including motorcycles, pharmaceuticals, medical equipment, contraceptive products, used equipment; without the previous approval of CBCR, or prohibited goods, prohibited goods under USAID regulations, including but not limited to the following: abortion equipment and services, luxury goods, etc.
- Covered telecommunication and video surveillance equipment or services – per ADS 303.3.35.2 and as further explained in 2 CFR 200.216 for U.S. organizations and the standard provision entitled, “Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment” applicable to non U.S. organizations, grant funds including direct and indirect costs, cost share and program income may not be used to purchase covered telecommunications equipment and services produced by or provided by the companies listed in the referenced provisions. The definition of “covered telecommunication equipment or services” is provided in the referenced provisions. Note that there is a temporary waiver in place that allows for the purchase of covered internet and phone service through September 30, 2022.
- Alcoholic beverages.
- Purchases of goods or services restricted or prohibited under the prevailing USAID source/ nationality (Cuba, Iran, North Korea, and Syria).
- Any purchase or activity which has already been made.
- Purchases or activities are unnecessary to accomplish grant purposes as determined by CBCR.



- Prior obligations of and/or, debts, fines, and penalties imposed on the Grantee.
- Creation of endowments.

## IVB. CONCEPT NOTES AND SUBMISSION INFORMATION

Concept Notes shall be submitted in **English** and may not be more than **10 pages**. Concept Notes (including the budget and supporting documentation) should be submitted in electronic form to CBCR at the address below and should reference Concept Note No. **CBCR-CN-011-2024**.

Please submit all questions concerning this solicitation by no later than **5:00 PM EAT** on **20<sup>th</sup> December 2024**, to the attention of CBCR, via email to [grants@cbcreilience.com](mailto:grants@cbcreilience.com).

Concept Notes must be submitted no later than **05:00 PM EAT**, on **3<sup>rd</sup> January 2025**. Late or unresponsive Concepts will only be considered at the discretion of CBCR.

In addition to the Concept Notes, applicants should submit the following to CBCR:

- Implementation Plan
- Detailed budget
- A copy of the Applicant's valid legal registration,
- A copy of their latest audited financial statements.

## SECTION V. CONCEPT NOTES MERIT REVIEW CRITERIA

All Concept Notes will be reviewed by an internal review panel comprised of CBCR technical implementation staff, and recommendations may be vetted by a larger group. Concept Notes will be evaluated against the criteria below.

- Does the organization meet the eligibility requirements?
- Does the organization's Concept Notes highlight relevant past performance in this area?
- Does the proposed activity fit within the CBCR objectives described in the Concept Note?
- Is the request for funding commensurate with the potential impact?
- Is the product or service sustainable?

If the above terms are met, Concept Notes will be evaluated against the merit review criteria in the table below.

Merit Review Category	Rating (Points)
A. Technical Approach	50
B. Management & Programmatic Capacity	20
C. Impact on Target Groups and Gender Equity and Social Inclusion (GESI)	15
D. Past Performance	15
<b>Overall Rating (out of 100 points)</b>	<b>100</b>

These merit review criteria elements are described more fully below.

- A. Technical Approach.** This element will evaluate the alignment with stated priorities, clarity on the problem, experience in SRH services and GBV prevention and response, knowledge of GBV hotspots/most affected locations and access to health facilities for implementation of program and complementarity with existing USAID and non-USAID funded projects and activities. Additionally, the innovation, scientific quality, experimental design, and soundness of the approach will also be evaluated. Lastly, the feasibility and likelihood of scaling, widespread adoption, and sustainability to ensure lasting impact will be evaluated. **50 points**
- B. Management and Programmatic Capacity.** Evidence of the capability to undertake and accomplish the proposed activities and positively strengthen the environment for social cohesion and resilience programming. The application should demonstrate the organization's effectiveness in terms of internal structure, technical capacity, and proposed personnel, in meeting resilience goals. In addition, the organization must demonstrate adequate financial management capability. The evaluation will be based principally on the background, qualifications, reputation, appropriateness, and skills of its proposed personnel; and the "track record," reputation, and achievements (including development of self-sufficient, sustainable activities) of the organization. The other element assessed here is monitoring, evaluation, and learning (MEL). **20 points**
- C. Impact on Target Group.** The extent to which the proposed activity corresponds to the needs of target groups (including young women and adolescents) and will directly benefit them. Also, the degree to which it will directly or indirectly stimulate and leverage other organizations and resources to replicate, develop, or implement activities supporting the objectives of CBCR. This criterion measures an organization's current level of engagement with the community and how sustainable the activities are for long-term resilience. In this criterion, we will also evaluate *Gender Equity and Social Inclusion*. The extent to which the proposed activity includes a gender and social inclusion component or represents a strong commitment to women and vulnerable groups including young people as beneficiaries. See *ADS 303.3.6.2.c., Gender Issues, for additional information*. **15 points**
- D. Past Performance.** Previous or ongoing experience implementing GBV prevention and response activities and evidence of supporting sexual reproductive health programming at the community and programming at health facilities levels in the target clusters. This examines an Applicant's references and experience, which is a critical factor in assessing the capacity of the organization to implement the activity. **15 points**

Additionally, CBCR will ensure environmental soundness and compliance in design and implementation as required by 22 CFR 216.

## **SECTION VI. AWARD AND ADMINISTRATION INFORMATION**

All grants will be negotiated, denominated, and funded in local currency. All costs funded by the grant must be allowable, allocable, and reasonable.

Issuance of this Concept Note and assistance with application development do not constitute an award or commitment on the part of CBCR, nor does it commit CBCR to pay for costs incurred in the preparation and submission of an application. Further, CBCR reserves the right to accept or

reject any or all applications received and reserves the right to ask for further clarifications from the offerors. Applicants will be informed in writing of the decision made regarding their application.



**Annex A. Grant Concept Note Template**

- 1. Organization name:
  
- 2. Date organization was founded and registration status:

- 3. Contact information:

Key contact person(s) and title:	
Office address:	Office phone:
Mobile:	
Email:	Website:

- 4. Briefly describe the organization, its purpose, and past related experience:
  
- 5. List contact information for three (3) references from previous donors or organizations (U.S. and other) that your organization has collaborated with in the last two years:

Donor Agency or Organization	Nature of Relationship or Title of Project, Location	Start & End Dates of Collaboration	Contact Person
			Name & Position: Email: Tel:
			Name & Position: Email: Tel:



			Name & Position: Email: Tel:
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6. Have any of the key personnel or leadership of this NGO been terminated or resigned in lieu of termination for any misconduct, including fraud or sexual harassment? If yes, please list the name and title.
  
7. Title of the proposed grant activity and which specific activity it corresponds with under IC of the scope of work:
  
8. Background: Based on the problem statement above, the objectives of this RFA and indicators proposed, what is the issue or problem that the activity will address? Why is it critical to address this issue? Who are the actors and what are the gaps in implementation for example?
  
9. Where are the most critical areas most affected by GBV and related SRH in Karamoja/Mandera/Moyale clusters? (*Provide evidence in form of reports or studies to show the hotspots*)
  
10. Which Health Facilities Exist in the most affected areas and which facilities do you propose to target? Do the survivors of GBV and SRH beneficiaries have access to this(es) facility(ies)?
  
11. Objective of the proposed grant activity:
  
12. Describe the proposed activity and expected results in detail, considering the merit review criteria in the solicitation.
  
13. Identify beneficiaries, disaggregated by gender, if possible. Additionally, detail how the grant activities will reach the intended beneficiaries, and how they will benefit from the grant:



14. Describe the main approach for monitoring, evaluation, and learning (MEL). What indicators will be used to measure the success of the activities?

15. Anticipated duration of activity from start to finish:

Overall length (total number of months)	
Start and end date (day, month, and year)	

16. Approximate cost of this activity (including cash, in-kind i.e., donated goods or services], and third-party sources):

Budget Category	Budget requested to be provided by CBCR	Applicant Resources (in local currency)	Third Party Resources (identify source) (in local currency)	Total Resources Needed (in local currency)
Salaries:				
Other Direct Costs:				
Training:				
Travel and Transportation:				
Goods and Materials:				
<i>[Add more rows as needed.]</i>				
Total Estimated Costs (in local currency)				
Name of Currency:				

By affixing my signature below, I certify that to the best of my knowledge, the information provided in this application is accurate and correct:

Submitted by \_\_\_\_\_ (Name and Title): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





**FOR PROJECT USE ONLY**

Date received \_\_\_\_\_ Grant Reference No. \_\_\_\_\_

The undersigned hereby certifies that: (a) the prospective grantee has received an official delivery receipt for its *Grant Concept*, (b) a copy of that receipt has been filed, (c) a reference number has been assigned, and (d) a grant application file has been opened. In addition, the prospective grantee has been advised as to the review and appraisal process, and its primary project point of contact.

Name, Grants Manager \_\_\_\_\_ Date \_\_\_\_\_

**ANNEX B – Grant Application Budget** (Excel budget template attached).



CBCR-CN-010-2024  
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**ANNEX C - Implementation Plan Timeline**



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**Annex D – Mandatory and Required as Applicable Standard Provisions (required by ADS 303.3.8)**

- Standard Provisions for U.S. and Non-U.S. Nongovernmental organizations receiving a fixed amount award can be accessed through the following URL: <https://www.usaid.gov/sites/default/files/documents/303mat.pdf>
- Standard Provisions for U.S. Nongovernmental recipients receiving all other types of grants can be accessed through following URL: <https://www.usaid.gov/sites/default/files/documents/303maa.pdf>
- Standard Provisions for Non-U.S., Nongovernmental recipients receiving all other types of grants can be accessed through the following URL: <https://www.usaid.gov/sites/default/files/documents/303mab.pdf>