

# **WBF MOVE GRANTS OCTOBER 2023 PROJECT APPLICATION FORM**

Annex A.

| Name of the Applicant | Are YOU applying as individual                              | Contracting Party of the Lead/Individual Applicant  | Area of Intervention ( <i>keep ONLY options that respond to you</i> ):  | Budget requested from WBF: |
|-----------------------|---|---|---|----------------------------|
|                       | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Albania<br><input type="checkbox"/> Bosnia and Herzegovina<br><input type="checkbox"/> Kosovo*<br><input type="checkbox"/> Montenegro<br><input type="checkbox"/> North Macedonia<br><input type="checkbox"/> Serbia | <input type="checkbox"/> Arts & Culture<br><input type="checkbox"/> Education and scientific exchange<br><input type="checkbox"/> Media<br><input type="checkbox"/> Environmental protection & Climate change<br><input type="checkbox"/> Economic development & digital innovations<br><input type="checkbox"/> Peacebuilding<br><input type="checkbox"/> Sports |                            |

|                                   |  |
|-----------------------------------|--|
| NUMBER OF THE PROJECT APPLICATION | < To be inserted automatically by the OGMS > |
|-----------------------------------|--|

## 1. GENERAL INFORMATION ABOUT THE APPLICANT (MAX 1 PAGE)

*\*Projects that do not adhere to these restrictions may be not evaluated and reviewed.*

|  |                     |
|--|---------------------|
| Title of the project:  |                     |
| The address of the applicant   |                     |
| City of residence  |                     |
| Applicant's contact telephone number (mob / landline):               |                     |
| Contact person's email:  |                     |
| Applicant – social media channels: Instagram, LinkedIn or Facebook): |                     |
| Gender   | Female/ male/ Other |

## 2. APPLICANTS PROFILE

Please introduce yourself who you are, what do you do and what are your professional interests.

|   |
|---|
| <i>What is your profession/engagement (i.e: Professor/ researcher/ student/artist)</i>                                      |
| (Who you are, what do you do and what are your professional interest)<br><br><i>Please limit your response to 500 words</i> |

### 3. GENERAL INFORMATION ABOUT THE HOST ENTITY

As individual applicant please provide information about the entity which would host the event or activity/ies under this project. (*\*Host entity is the organisation/institution where the applicant is going to*)

|  |  |
|--|--|
| Name of the host entity:   |  |
| Contracting party of the host entity:<br><i>(please keep <b>ONLY options that respond to you</b>):</i> | <input type="checkbox"/> Albania<br><input type="checkbox"/> Bosnia and Herzegovina<br><input type="checkbox"/> Kosovo*<br><input type="checkbox"/> Montenegro<br><input type="checkbox"/> North Macedonia<br><input type="checkbox"/> Serbia<br><input type="checkbox"/> Other, please indicate:                                  |
| Type of host entity:<br><i>(please keep <b>ONLY options that respond to you</b>):</i>                  | <input type="checkbox"/> Civil Society Organisation (CSO)<br><input type="checkbox"/> Educational institution<br><input type="checkbox"/> Media<br><input type="checkbox"/> Institution of culture, arts or sports<br><input type="checkbox"/> Business association or similar<br><input type="checkbox"/> Other, please indicate: |
| Host Entity's postal address:  |  |
| Host Entity's telephone number:  |  |
| Contact person on the Host Entity's behalf:  |  |
| Host Entity's contact email:   |  |
| Host Entity's website:   |  |

### 4. PROJECT SUMMARY

The project summary is a condensed version of the entire project that highlights the duration and objectives under the proposed project. Try to provide a clear, concise, and free of excessive detail to provide an overview of the project for the Evaluators. This section shall include information on the addressed topic, relevance of the project, objective(s), duration of implementation, and the expected benefits from the proposed activities. The summary is the first section of the project that is reviewed by the Evaluation Committee and is critical in determining the project's feasibility and impact.

|   |  |   |
|---|--|---|
| D<br>E<br>S<br>C<br>R<br>I<br>P<br>T<br>I<br>O<br>N           | <p>What is the main topic you would like to address and/or would like to learn from?</p> <p>How is the topic related to one or more intervention areas of the MOVE Grants?</p> <p>(1.000 characters max)</p> |   |
|   | <p>Time frame for the project (from / to)</p> <p><i>NB: duration of the project is up to 6 months</i></p>  |   |
|   | <p>What is the desired result/s of your project to regional cooperation?</p>   |   |
| R<br>E<br>L<br>E<br>V<br>A<br>N<br>C<br>E                     | <p>Relevance of the project to the Objectives of the Call and to the WBF mission</p>   |   |
|   | <p>Describe your role and host entity's role in this project and its relevance for the project objectives</p>  |   |
|   | <p>How will your project contribute to the people-to-people contacts/networking within the region?</p>   |   |
| A<br>C<br>T<br>I<br>V<br>I<br>T<br>I<br>E<br>S<br>&<br>O<br>U | <p>Please provide desired project results:</p> <p><i>(keep ONLY options that respond to you):</i></p>  | <ul style="list-style-type: none"> <li><input type="checkbox"/> Enhanced capacities of the participants</li> <li><input type="checkbox"/> Increased awareness on the regional dimension of the shared problem / issue</li> <li><input type="checkbox"/> Improved exchange of ideas and experiences between the regional partners in two or more CPs</li> <li><input type="checkbox"/> New ideas on regional cooperation developed and promoted</li> <li><input type="checkbox"/> Enhanced "people to people" connections in the WB region</li> <li><input type="checkbox"/> New partnership established</li> <li><input type="checkbox"/> Existing partnership (established under previous WBF funded project) improved</li> <li><input type="checkbox"/> Existing partnership (established without previous WBF support) improved</li> </ul> <p>Other, please indicate</p> |
|   | <p>Please provide concrete outputs/deliverables</p> <p><i>(keep ONLY options that respond to you):</i></p>   | <ul style="list-style-type: none"> <li><input type="checkbox"/> Event report</li> <li><input type="checkbox"/> Research brief</li> <li><input type="checkbox"/> Memorandum on future cooperation</li> </ul>   |

|  |  |  |
|--|--|--|
| T<br>P<br>U<br>T<br>S  |  | <input type="checkbox"/> Partnership agreement<br><input type="checkbox"/> Joint project concept<br><input type="checkbox"/> Joint media product<br><input type="checkbox"/> Campaign report<br><input type="checkbox"/> Other, please specify |
|  | Project activities<br><br><i>(List the planned activities and briefly explain how they would contribute to the planned outputs and deliverables. Applicant should carefully plan the activities; ensure they are feasible and provide assurances they could be implemented within the proposed project timeline)</i>   |  |
| F<br>O<br>L<br>L<br>O<br>W<br>-<br>U<br>P                              | Project follow-up of the project (if applicable)<br><br><i>(Briefly explain how the project would contribute to the future cooperation between the participants/partners, and any planned follow up project. In addition, the applicant should consider the potential of the project results becoming the good practice and/or model of cooperation at regional level)</i> |  |
|  | Visibility objectives<br><br><i>(Explain what you want to achieve with the promotion of the project, and to which audiences you want to engage with. The visibility objectives should specific and achievable)</i>   |  |
| P<br>U<br>B<br>L<br>I<br>C<br><br>O<br>U<br>T<br>R<br>E<br>A<br>C<br>H | Submit at least 3 social media channels and proposed content (images, videos, text) documenting the progress of the project.   | <input type="checkbox"/> Instagram<br><input type="checkbox"/> Facebook<br><input type="checkbox"/> LinkedIn   |
|  | Please provide social media channels or any publication of the host entity on its activities?  |  |
|  | Are you ready to remain available to engage with public audiences and other WBF grantees through social media, online conversations, interviews and webinars   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No  |
| EXPERIENCE   | Have you ever in the past led or participated in a regional project in the Western Balkans?  | <input type="checkbox"/> Yes (If yes, please provide a short description max.3 phrases)<br><input type="checkbox"/> No   |

|                        |                  |  |
|------------------------|------------------|--|
| TIMELINE OF ACTIVITIES | Up to six months |  |
|------------------------|------------------|--|

## 5. APPLICATION CHECKLIST

*(To be filled in by the applicant for self-guidance purposes only)*

| Before sending your full application, please check that each of the criteria below have been met in full: | Yes | No |
|---|-----|----|
| Signed Declaration by the Individual Applicant.   |     |    |
| The project is typed and is written in English.   |     |    |
| The detailed budget is enclosed, in balance, presented in the format requested, and stated in EUR.        |     |    |
| The duration of the project is not exceeding 6 months.  |     |    |
| The requested WBF contribution (amount) is not exceeding 5,000 EUR  |     |    |
| The project falls at least within one area of intervention  |     |    |
| The project includes mobility   |     |    |