

NEW ZEALAND EMBASSY, BEIJING

HEAD OF MISSION FUND (HOMF) MONGOLIA APPLICATION FORM

Note: This programme is designed to assist small, village-level projects with grants of around NZ\$10,000. Please refer to the separate guidelines detailing purpose of fund and criteria.

A INTRODUCTORY DETAILS

Name of project: _____

Project location (please provide a simple map): _____

Project duration: _____

Start date: _____ Completion date: _____

Amount of funding sought (specify currency): _____

Name of applicant: _____

Address of applicant: _____

Telephone: _____ Facsimile: _____

Email address: _____

Name of principal contact person: _____

Name of implementing agency/organisation (if different from applicant):

Address of implementing agency:

Registration number (if applicable): _____

How will they participate?

Please provide an implementation plan for the project (i.e. an activity programme outlining tasks, inputs and timeframes) in the below format or attached separately.

Implementation plan (Show key tasks)

Start Date	End Date	Task	Inputs required

Describe any problems that might arise during the implementation of this project and how you will minimise them:

Once the project activity is complete who will take responsibility for future costs and maintenance?

C PROJECT RESOURCES AND FINANCING

Please provide a budget for the project including details of proposed expenditure of the New Zealand contribution, the local (Mongolian) contribution or input, and contributions from any other source. Please attach the budget separately or detail in the below table.

Activity/Input (e.g. labour, transport, materials)	Cost* (in US dollars)
New Zealand Contribution:	
Total	
Local Contribution:	
Total	
Contribution from other sources: (please specific)	
Total	
TOTAL BUDGET IN LOCAL CURRENCY:	
AMOUNT IN NEW ZEALAND DOLLARS:	

Have you requested assistance from any other sources? If yes, please provide details:

Please provide details of the bank account into which the New Zealand contribution should be made, if your project application is successful. Please note: Any New Zealand funding must be paid to the account of the applicant/implementing organisation and not into an individual (personal) bank account.

Bank account name: _____

Bank account number: _____

Name of bank: _____

Address of bank: _____

Bank SWIFT number: _____

Account Currency: _____

[If the bank account details are changed after the presentation of your application, please advise the New Zealand Embassy of the new one as soon as possible.]

D OTHER CONDITIONS

The project implementing agency and applicant will provide the New Zealand Embassy with a report on the use of funds and giving details of the achievements within two months of completion of the project. For projects lasting over six months, a brief six monthly progress report should also be submitted.

Officers from the New Zealand Embassy may wish to visit the project during travel to the provinces.

Any queries should be directed to the New Zealand Aid Programme officer at the New Zealand Embassy in Beijing. Contact details are:

New Zealand Aid Programme Officer
New Zealand Embassy
No. 3 Sanlitun Dongsanjie
Chaoyang District
Beijing 100600
People's Republic of China

Telephone: (86) 10-8531 2700
Facsimile: (86) 10-6532 4317
E-mail: beijing.enquiries@mft.net.nz

E FINAL CHECKLIST

Have you :

- a. **Completed all sections of the form correctly and truthfully?**
- b. **Enclosed quotations/invoices/purchase orders for the materials or equipment you seek?**
- c. **Attached lists of names for project participants?**
- d. **Have you signed below?**

Application submitted by:

Name _____ Title _____

On behalf of (organisation): _____

Signature _____ Date _____