ARBEITSGRUPPE FRAUEN

Merseburger Str. 3 10823 Berlin

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agfrauen@umverteilen.de www.umverteilen.de



## APPLICATION FOR FUNDING

No / Contact pa	rtner in the Working Group		
PLEASE FILL IN THE FORM IN GERMAN OR ENGLISH!			
1. INFORMATION ABOUT YOUR G	ROUP/ORGANISATION		
Name of the group/organisation			
Country	Contact person		
Street	Postal code Place		
Phone for inquiries	Fax		
Email	Website		
Bank account			
Holder of bank account			
IBAN	BIC		
ANGABEN ZUM BEANTRAGTEN P	PUIEKT		
ANGADEN ZOM BEANTRAGTEN I	ROULKI		
Project title			
Project period	Amount applied for		

We would like to ask you to answer the following questions as precisely as possibly. This helps us to get a better picture of your project and the project's circumstances. It would be unsatisfactory for both sides if a project was rejected for lack of information. At the same time, these questions might serve as a guideline to detail your project together with your group. If you are not able or do not want to answer individual questions, just leave them out. We thank you in advance for providing all this information and ensure you that it will be treated with absolute confidentiality.

## 3. INFORMATION ABOUT YOUR GROUP/ORGANISATION When and for what purpose was your group/organisation founded? (short history, reasons) Is it registered? Yes Νo If yes, in which form? What is the organisational structure of your group/organisation? (How many persons are involved? Are there any paid employees? How do you reach decisions? How often does the group meet?

What are the goals of your group/organ	isation?	
How do you want to reach these goals?		
Please name one or two projects which		
(if possible detail precise activities, goa	ls, results)	

How is your group/organisation financed?
How did you find out about the Women's Issues working group of Umverteilen! Foundation (AG Frauen)?
4. DESCRIPTION OF THE PROJECT
What situation does the applied project currently face (e.g. specific situation for women and trans* in the respective country/region)?

What activities are planned? (Please give details about who, what, when, where, how)	
Please describe your target group:	



Which short	- and long-term c	hanges do you wa	nt to achieve with	your activities?		
(A. Short-te	riii Changes / D. L	ong-term changes	o)			
	work with to imp	lement your proje	ct goals? What a	re vour partner o	rganisations?	
Who do you		, ,	3	,	3	
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What role do they play in this project?
How do you assess the success of your project?
now do you assess the success of your project.
Do you want to continue your work after completion of the project?

Can you name any persons/organisations as reference?				
(Two contact persons, what relationship do they have to your organisation?)				
Email	Pl	hone		
		hone		
LITIAII	1 1			
5. BUDGET				
J. BODGET				
Total costs of project				
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in local currency in	i euros			
T. 1				
Total costs of project				
in local currency in	euros			
( = 1   1   1   1   1   1   1   1   1   1				
6. FINANCING PLAN				
Have you applied for project financing elsew	vhere? Yes	No		
If yes, where?				
Have you received any commitments concerning financing the project?				
Do you have any own funds?				

## Anything else you want to tell us?

## 8. SEND APPLICATION

7. OTHER

Please remember to attach the financing plan. You can download one from our website www.umverteilen.de/frauen01.html#top

Please save the application as a pdf and send it to AGFrauen@umverteilen.de

Please send the filled form directly to Umverteilen! Stiftung für eine, solidarische Welt Merseburger Str.3 10823 Berlin