



ANNEX 1:

Template Technical Proposal



International

Contact info:

Website: www.r4cr.org

Facebook: [r4crsxm](https://www.facebook.com/r4crsxm)

E-mail: info@r4cr.org

RESOURCES FOR COMMUNITY RESILIENCE (R4CR)

ANNEX 1: Template Technical Proposal

A. ABOUT YOUR ORGANIZATION

A1 Please fill out the general information on your organization and project in the tables below.

Legal name of the Organization	
Full Official Address	
Telephone Number	
E-mail address	
Website (if any)	
Facebook (if any)	
Name of your R4CR Project	

	Contact person/Coordinator
Name (first name, last name)	
Position	
E-mail address	
Telephone	

	Board Member
Name (first name, last name)	
Position	
E-mail address	
Telephone	

Type of Organization (Foundation, Association or other)	
Registered with the Chamber of Commerce & Industry (COCI)	Yes No
Date of initial registration (dd/mm/yyyy)	
Date of last updated registration (dd/mm/yyyy)	
COCI registration number	
CRIB Number	

A2 Describe in short your organization and the main sector your organization is active in?

A3 Describe a few projects your organization has implemented in the last five years with support from external donors. Include the project budget and name of the external donor.

B. ABOUT YOUR R4CR PROJECT

B1 From the list below, what is the sector your R4CR project will cover? More than one sector can apply to your project.

- Community Councils/neighborhood initiatives and initiatives for relief;
- Day care centers/afternoon school programs and extracurricular activities;
- Sports and recreation activities/facilities;
- Nature and environment (re-/upcycling) and animal welfare activities;
- Art, cultural, archaeological and heritage activities;
- Psycho-social and emotional support;
- Poverty relief;
- Youth employment/entrepreneurship;
- Skills development
- Tackling gender based violence

B2 What is the main objective/goal of your current R4CR project?

- B3** What is the planned start and end date of your project? How long will your project be implemented? Please note that this second 'Quick Win' still has a project lead time of maximum 6 calendar months!

Start Date (dd/mm/yyyy)	End Date (dd/mm/yyyy)

- B4** What rehabilitation and/or reconstruction elements of your project are a DIRECT result of hurricane Irma?

- B5** What are the main intended TANGIBLE results/outcomes of your project?

Use the SMART goal mechanism (Specific, Measurable, Attainable, Relevant, Time-bound)ⁱ.

To make sure the goal(s) you have identified in your project are clear and reachable, each one should be: **specific** (simple, clear and unambiguous), **measurable** (meaningful and motivating), **achievable** (agreed and attainable), **relevant** (reasonable, realistic and resource/result-based) and **timely** (time-based and time/cost limited).

B6 How will you monitor and measure your results/outputs?

B7 What is the main target (group) expected to benefit from your project?

B8 Was your target group consulted and/or involved during the design stage of the project? If so, please explain in what way.

B9 Who, and how many, will benefit directly and indirectly from your project? In what way?

Direct Beneficiaries		Indirect Beneficiaries	
Who	Number	Who	Number

B10 How many staff/employees of your organization will be involved during project implementation?

Please state the person's name(s), function(s), whether he/she is a volunteer or employed (paid), and estimate the amount of time each person will spend on project activities (on a monthly basis).

Name (first name, last name)	Function(s)	Volunteer or Employed	# hrs per month

B11 Do you know of any similar initiatives on Sint Maarten? If so, what unique selling point(s) does your project have?

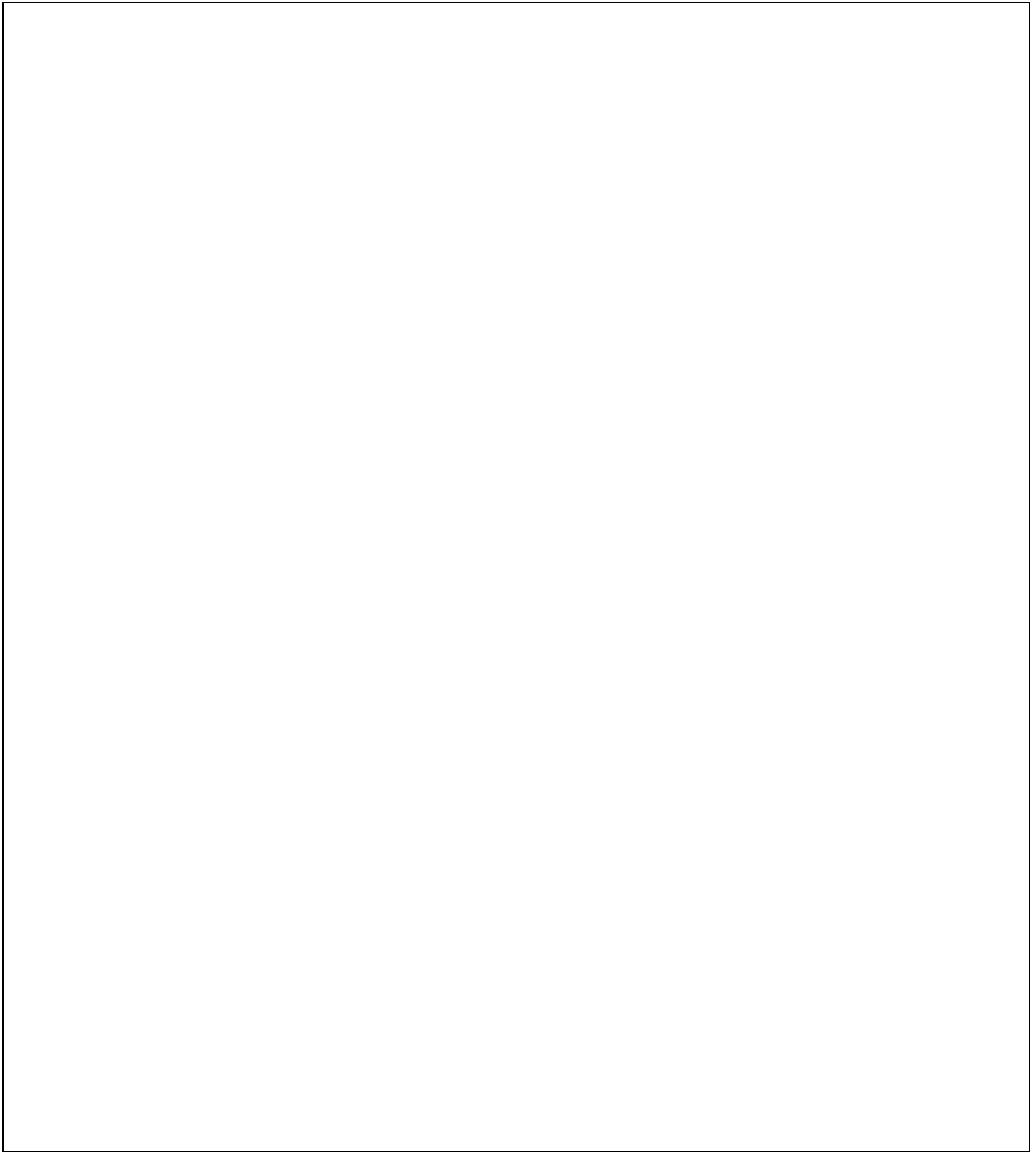
--

B12 Is your organization planning to implement the project independently or in collaboration with (an)other organization(s)? In case of a joint approach, please list the collaborating organization(s) and specify their role during project implementation and who will take on the lead.

C. ABOUT YOUR PROJECT PLAN

C1 Give a clear description of your project taking into account the following elements (maximum 1,000 words). In other words share a detailed project plan. We welcome numbers and data. We need to get a clear understanding on what and how your organization translates your objective into successful outcomes/results. You may also send a separate file sharing your project plan.

- How are you going to achieve your project objective/goal?
- What are the specific project activities?
- Who is going to implement the activities (number of people and time spent), whom and how many will benefit?
- What is the time frame of the project?
- What is the expected end-result?
- How will you involve project beneficiaries, if applicable?
- How will you organize the communication and information on your project with the community, general public, and target group?



D. SAFEGUARDS AND SUSTAINABILITY

D1 Do you foresee any social and/or environmental project risks? If so, which ones and how will the risks be mitigated?

D2 What is the chance that your project result(s) will become sustainable. Are there follow-up funds on which you can rely? Please explain in detail what you will do with the project results?

D3 Please complete the Social, Environmental and Cultural Heritage checklist below.

Social-Environmental and Cultural Heritage Screening Checklist

The checklist below must be completed by a CSO as part of Annex 1 – Technical Proposal for confirmation by the R4CR Management during Grant evaluation

Information on the Foundation (CSO)	
Name CSO (or Consortium if applicable)	
Registered Postal Address:	
Telephone Number:	
E-mail address:	

Environmental and Social Screening Information	Yes	No	Notes (if applicable)
1. Does the CSO need to have a valid environmental and/or labor license to implement project activities?			
2. If the CSO requires other permits or licenses, have they taken the necessary steps to attain these before project activities start? If yes, please explain.			
3. Did the CSO receive any environmental and social/labor fines, claims, penalties, or warnings from relevant authorities within the last three years while implementing project activities?			
4. Have there been any negative media report or complaint from the public, community or other entity about the operation of your organization during project implementation in the last three years?			
5. Does the CSO foresee activities under the project which cause excessive noise, vibration or other nuisance. If yes, please explain.			
6. Does the CSO comply with the national and NRPB guidelines and good practices for COVID-19 prevention provisions at work sites? If yes, how?			

Environmental and Social Screening Information	Yes	No	Notes (if applicable)
7. Does the CSO comply with national law or good practice for occupational health and safety, hygiene, and employee well-being during project implementation? If yes, in what way?			
8. Has the CSO been involved in any significant worker health incident or safety fatality during project implementation in the last three years? If yes, explain.			
9. Has there any complaint on GBV or SEA been registered by the CSO during the last three years while implementing project activities? If so, please explain.			
10. In case of environmental or natural activities dealing with earthmoving, is the CSO sure that the area is not contaminated or polluted?			
11. Is one or more of the CSO activities located in or around a natural area, a protected area or in an area with well-preserved vegetation. If yes what has the CSO done to guarantee that the habitat will not be disturbed?			
12. Will the activity(ies) of the CSO affect coastal or marine areas (beaches, seagrass, coral reefs) or involve aquaculture, fishing, or harvesting of marine resources?			
13. Will the activity involve temporarily or permanently moving people from their place of work or home?			
14. Has the CSO consulted with people in the area of the project activity?			
15. Will the proposed project of the CSO involve working on a site or building which is a national monument or cultural heritage resource (historic structure, artefact or landmark)?			

Certification and Authorization	
I certify that I have read the questions in this form, understand them, and answered them truthfully	

Formalized	
Name of CSO representative:	
Signature:	
Date:	

The below table is for completion by the R4CR Team Leader or Environmental and Social experts:

Review by R4CR
<p>After reviewing the project and the above screening tool describe any possible discrepancies in the above checklist which will be resolved with the CSO.</p>
<p>Does the proposed project include any activities with risks that cannot be mitigated by the mitigation measures described in table 5.2 of the ESMF?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>Explain:</p>
<p>Does this activity require the development of a site specific Environmental and Social Management Plan (ESMP)?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>If no, explain.</p>
<p>If yes, state the capacity of the CSO to develop that plan and the support that will be provided to assist them to produce the plan.</p>

Name of R4CR reviewer and Date of Review

E. SUPPORTING DOCUMENTATION

The following documents are included completing the total grant application package:

(please tic the boxes below of those you have submitted)

Scan or copy of¹:

- ☐ ANNEX 1: Your technical proposal (this document)
- ☐ ANNEX 2: Your financial proposal (the budget)
- ☐ The extract of the latest COCI registration
- ☐ The establishment of your CSO as a legal entity (notary deed – articles of incorporation)
- ☐ A copy of internal regulations known as the ‘Articles of Incorporation’ or ‘Statutes’ and by-laws (if applicable) associated with being a not-for-profit entity
- ☐ Two Financial reports/audits of the last two years
- ☐ Two Social or Technical reports of the last two years
- ☐ Your annual budget plan for this year
- ☐ The Project Plan mentioned under C1 when prepared as separate document

Approved by Board member:	Approved by Contact person / Coordinator:
Name:	Name:
Position:	Position:
Signature:	Signature:
Date	Date

¹ Reference is made to section 2.4 (application assessment) of the Grant Manual. In case of a consortium, each consortium partner must submit a scan or copy version of these documents.

FOR INTERNAL USE BY R4CR TEAM ONLY!

Date of receipt Grant application/Technical proposal	
Organization	
Round # (1-7)	Round 2
Type of project	<input type="checkbox"/> Quick Win <input type="checkbox"/> Regular
Received by	<input type="checkbox"/> E-mail <input type="checkbox"/> hard copy <input type="checkbox"/> both
E-mail address	
Signature Team Leader or Representative	