



EMBASSY OF THE
UNITED STATES
COTONOU, BENIN

U.S Embassy Cotonou STATEMENT OF INTEREST

Before completing this form, please read the program information and guidelines documents located at <https://bj.usembassy.gov/education-culture/apply-grant-us-embassy-cotonou/funding-opportunities/> so that you are aware of the specific program requirements and the supporting documentation required to complete your application.

Date:

ORGANIZATION BACKGROUND INFORMATION

Please print/type carefully.

1. Name of organization:
2. Location:
3. Mailing address:
4. Name of project manager:
5. Project manager email:
6. Project manager telephone numbers:
7. Year organization established:
8. Registration number of organization:
9. Data Universal Numbering System (DUNS) number:
(Applicants must have a Data Universal Numbering System (DUNS) number. If your organization does not have a DUNS number from Dun & Bradstreet, you may obtain one by visiting <http://fedgov.dnb.com/webform/pages/CCRSearch.jsp>.)
10. Does your organization have a bank account?
(Organizations must have a bank account to receive grant funds, if selected. This cannot be the personal bank information of any individual representative. CLCAM, Banque de l'habitat, and BSIC are not acceptable.)
11. Number of members in organization:

12. Number of people receiving salary/payment from organization:
13. Provide a brief description of your organization and its purpose.

14. What is the organization's yearly budget? How much is spent in a year?
15. List the assets and the value of the assets owned by the group (for example, land, equipment, money in bank).

16. Has this organization received funding from the U.S. Embassy before? If so, please give the name of the project, grant amount, and the year awarded?

17. How does your organization fund activities and administration costs (Please be specific. For example, if the operating budget comes from private donations than founders, please describe or name the donors)?

18. Describe your organization's three biggest achievements over the past three years (include place and date of achievement).

19. Describe your organization's main goals for the next three years. What problems does your organization plan to address/resolve?

PROJECT INFORMATION

20. Briefly describe your proposed project. Explain how your organization plans to use the grant money.

- 21. Provide a detailed budget for your project. Specify which project activities/purchases the grant would support and how your organization will cover the remaining costs. Attach additional documents, if necessary.

- 22. What is the total amount your organization is requesting from the U.S. Embassy Cotonou? (in U.S. dollars) Specify the grant program you are applying for (if known).

- 23. Describe the goal(s) of the project. Please be specific. What problem(s) does your organization intend to address/resolve as a result of the project and who will benefit?

- 24. How many people will **directly** benefit from this proposed project? Direct beneficiaries are the people who will make use of this project. For example, 50 students will use new school desks; 20 group members will use new tailoring machinery.

				Total beneficiaries
Number of Women 18 years+		Number of Men 18 years+		
Number of Girls 0-17 years		Number of Boys 0-17 years		
Total Females		Total Males		

Monitoring and Evaluation

Monitoring project activities is crucial to measuring progress toward your organization’s goal, and it is required for all recipients of U.S. Embassy grants. Please be specific when describing how your organization will report on project activities and results.

25. Describe the objective(s) of the project.

- What change will be achieved as a result of the project?

- Who will be affected?

- Where will the change take place?

- What is the timeframe of the project?

26. Describe the project activities that must be completed for the project to succeed.

- Why has your organization chosen these activities?

- Who will conduct the activities?

- What materials/resources are necessary for activities?

- Describe any collaboration(s) with other organizations/groups on your project activities.

27. Describe how your organization will monitor and report on the project's progress.

- What data will you collect, when, and how?

- How will you document your project's process and the activities carried out?

- Who will conduct the program monitoring and reporting?

28. Who will manage the grant money and the project? Please list person(s) and title(s).

29. Will another person or organization provide this project with assistance (for example, completing application, financial, administrative or technical)? If yes, please list the person or organization and the nature of their support. Include contact information.

30. What are the organization’s and/or community’s contributions to this project? Please be specific and list items and their monetary value.

31. Please describe how the project will be self-sufficient at the end of the self-help funding. How will your project continue once funding from this grant ends?

PROJECT COMMITTEE

32. Please list all project committee or group members working on this project.

#	Name of project/group members	Title	Cell number and Email address
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

10.			
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Community Support

33. Please include one (1) letter of community support with this application clearly endorsing the proposed project. This letter may come from your Village Executive Officer, District Executive Director, or if relevant to the project, District Education or Health Officers. Please provide information below regarding this letter.

	Name of community support person	Office, Title	Cell number and Email address
1.			

References

34. Please provide two (2) independent references for your group if available. These references will be able to verify the group’s successes and/or the project coordinator’s ability to organize and manage this project.

#	Name of Reference	Organization	Relationship with project	Cell number and Email address
1.				
2.				
3.				

Applicant Signature

I certify that all information contained in this form is correct to the best of my knowledge.

Print Name, Title	Signature	Date

QUESTIONS?

You can access program descriptions, grant guidelines, and statement of interest (in English and French), at <https://bj.usembassy.gov/education-culture/apply-grant-us-embassy-cotonou/funding-opportunities/>. If your group has any questions, please email us at CotonouGrants@state.gov.

For consideration, please email your completed application to CotonouGrants@state.gov (include the grant program name, if known, in the subject line), or mail application to:

**U.S. Embassy
1 BP: 2012
Cotonou, Benin**

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01 BP: 2012
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CotonouGrants@state.gov