

# **APPLICATION FORM**

Preventing HIV/AIDS in Vulnerable Populations (OVC&Y) Programme in South Africa (May'Khethele)

## 1. Organisational Details & Governance Structure

1.1	Organisation name	
1.2	Address	
1.3	Contact details	
1.4	Name of contact person	
1.5	How is the organisation constituted as legal entity? <b>Attach Annex 1: Founding documents e.g. Constitution.</b> <b>Attach Annex 2: NPO Registration Certificate.</b>	
1.6	Is the organisation registered as a tax-exempt organisation Attach Annex 3 Certificate with SARS?  <b>Attach Annex 3: PBO certificate or letter from SARS.</b> <b>Attach Annex 4: Tax Clearance Certificate.</b>	
1.7	Does the organisation have a formal B-BBEE status? <b>Attach Annex 5: Relevant B-BBEE Certificate</b>	Yes/No (delete what is not relevant)

## 2. Programme profile, experience and technical capacity

Please complete the table below to highlight the organisation's experience in the implementation of OVC and or GBV programmes.

2.1	Provide a short (½-page) description of your experience in implementing OVC Programmes for the last 2 years with detailed description on services delivered in specific areas of UThukela District.	
2.2	Please describe how services are rendered to beneficiaries' i.e. home visits, group work, and awareness as schools. How often does a beneficiary receive services?	

2.3	<p>Please describe your experience, if any, with the following interventions:</p> <ul style="list-style-type: none"> <li>• DREAMS</li> <li>• ASPIRES</li> <li>• Vhutshilo 2</li> <li>• Impumelelo</li> <li>• Let's Talk</li> <li>• Stepping Stones</li> <li>• Chommy</li> <li>• YOLO</li> <li>• Other</li> </ul> <p>Please also indicate the number of trained facilitators on these programs if available.</p>	
2.4	<p>Do you categorise your clients according to number; age; gender and service categories? Who are your beneficiaries and what is the age categories for your beneficiaries?</p>	
2.5	<p>Describe the process you use to enrol clients to the programmes that you offer. Please also indicate what the enrolment criteria is for your OVCY and GBV programmes.</p>	
2.6	<p>Please describe your referral system that you use to for services your organisation is not able to provide for your beneficiaries.</p>	
2.7	<p>Are your programmes aligned HIV &amp; Sexual Reproductive Health services? Please describe how.</p>	
2.8	<p>Please provide list of health facilities and organisations that form part of your referral network. Please indicate which you have formal MOUs with <a href="#">Attach Annex 7 List of referral organisations for HIV Services</a></p>	

	<b>Attach Annex 9: MOUs as applicable</b>	
2.9	Describe the organization's monitoring systems, data collection tools and reporting capacity and experience. How do you track your data and important source documents? Do you use a manual or electronic filing system? Describe the system you are using.	
2.10	How do you ensure data quality management and quality improvement of programs in your organisation?	

### 3. Financial information

3.1	Describe the qualifications and capacity of the finance team in your organisation.	<b>Position (name in brackets if available)</b>	<b>Qualification</b>	<b>Years of experience</b>	
3.2	List your current donors for the programme, size of funding and what the funding covers. Add rows if necessary.	<b>DONOR</b>	<b>GRANT AWARD (ZAR)</b>	<b>GRANT TERM (Start &amp; Finish Dates)</b>	<b>SUMMARY OF PROGRAMME COVERED BY GRANT</b>
3.3	Please indicate your organisations level of financial auditing <ul style="list-style-type: none"> <li>• Audited Financial Statements</li> <li>• Reviewed Financial Statements</li> <li>• Compiled Financial Statements</li> </ul>				

	<b>Attach Annex 9: Most recent Audited Financial Statement</b>	
3.4	Please disclose details of any circumstances, including personnel, financial and business activities that will, or might, give rise to a conflict of interest. If this is not relevant, please state that there is none.	
3.5	Has the organisation been the subject of any proceedings or other arrangements relating to bankruptcy, insolvency or financial standing?	
3.6	Has the organisation been the subject of any proceedings, relating to: <ul style="list-style-type: none"> <li>- participation in a criminal organisation.</li> <li>- corruption including the offence of bribery.</li> <li>- fraud including theft, and not fulfilling any obligations</li> <li>- relating to payment of taxes</li> <li>- money laundering.</li> </ul>	

#### 4. Human Resources

4.1	Please describe your current staff in terms of the total number of staff and the skills sets of staff currently responsible for programme implementation. <b>Attach Annex 10: Organogram showing all the staff of the organisation but highlighting those that will be involved in the implementation of the programme</b> <b>Attach Annex 11: Copies of CVs of key programme personnel, i.e. Programme Manager, M&amp;E Manager,</b>	
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	Finance Manager, Site coordinators that will be involved in the implementation of the programme	
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## 5. Attachments

Please provide the following documentation together with this Application Form and numbered as indicated.

Annex No	Document
Annex 1	Copy of founding documents (Constitution, Articles, etc.)
Annex 2	Copy of the NPO Certificate
Annex 3	Copy of Public Benefit Organisation certificate/letter from SARS
Annex 4	A valid SARS tax clearance Certificate
Annex 5	Relevant B-BBEE verification certificate
Annex 6	A list of your management staff
Annex 7	List of referral network organisations
Annex 8	MOUs with partners as applicable
Annex 9	Audited Financial Statements
Annex 10	Organogram showing all the staff of the organisation but highlighting those that will be involved in the implementation of the programme
Annex 11	Copies of CVs of key programme personnel, i.e. Programme Manager, M&E Manager, Finance Manager, Site coordinators that will be involved in the implementation of the programme

The preparation and the submission of the proposal and its annexes is the responsibility of the applicant and no relief or consideration can be given for errors and omissions.

Please sign this template below with the following assurances: indicating that, and

I/we the undersigned acknowledge that:

- The proposal is complete and an accurate and truthful statement of the organisation's affairs.
- There is no conflict of interest (for example, if you have relatives who work at CINDI). If any, please describe below.
- We understand that any misrepresentation contained in the proposal may lead to disqualification.

COMMENTS RE CONFLICT OF INTEREST