



**DIRECT AID PROGRAM (DAP) EXPRESSION OF INTEREST 2022-2023**

<b>Type of organisation</b>			
<i>This could include, but is not limited to:</i> <ul style="list-style-type: none"><li>• Youth group</li><li>• Education institution</li><li>• Women's group</li></ul>	<ul style="list-style-type: none"><li>• Non-government organisation</li><li>• Village or community-based group</li><li>• Faith-based organisation</li><li>• Civil society group</li></ul>		
<b>Postal address</b>	<b>Address:</b>		
	<b>Town/Village:</b>	<b>State/Province:</b>	<b>Country:</b>

<b>Primary contact</b>	<b>Title</b>	<b>First Name</b>	<b>Last Name</b>
<b>Position</b>			
<b>Work phone number</b>			
<b>Mobile phone number</b>			
<b>Email</b>			

<b>Have you received DAP funding previously?</b>	
--	--

**PROJECT PROPOSAL**

<b>Name of project</b>	
<b>Project summary</b> (including objectives and information about who will benefit from the project - gender, age, location, etc.) <u>Must be no more than 300 words</u>	

## PROJECT LOCATION

<b>Project country</b>	
<b>Location of project (village, district and Province)</b>	

## FUNDING

Please outline the total project cost, the amount your organisation is requesting from DAP and how much your organisation will contribute to the project costs.

<b>Currency type (AUD OR PGK)</b>	
<b>Total project cost</b>	
<b>Total amount requested</b>	
<b>Applicant's contribution</b>	

## FOCUS AREAS

- |  |  |
|--|--|
| <input type="checkbox"/> Gender equality   | <input type="checkbox"/> Education (Infrastructure)                  |
| <input type="checkbox"/> Inclusion and empowerment of Indigenous groups                | <input type="checkbox"/> Education (general)                         |
| <input type="checkbox"/> Inclusion and empowerment of people living with disabilities  | <input type="checkbox"/> Conferences, Training, or Capacity Building |
| <input type="checkbox"/> Inclusion and empowerment of other vulnerable minority groups | <input type="checkbox"/> Cultural or sporting activities             |
| <input type="checkbox"/> Community Health  | <input type="checkbox"/> Poverty alleviation                         |
| <input type="checkbox"/> Sanitation  | <input type="checkbox"/> Disaster or humanitarian relief             |
|  | <input type="checkbox"/> Protection of the environment               |
|  | <input type="checkbox"/> Rural Development or Agriculture            |
|  | <input type="checkbox"/> Rural Development (electrification/solar)   |

## FURTHER DETAILS

Please provide any further details you think may be relevant to your organisation's application. Please provide further details you may consider important for this Expression of Interest.

--

## REFEREES

### REFEREE 1

<b>Name</b>	<b>Title</b>	<b>First Name</b>	<b>Last Name</b>
<b>Position</b>			
<b>Primary phone number</b>			
<b>Primary email</b>			

### REFEREE 2

<b>Name</b>	<b>Title</b>	<b>First Name</b>	<b>Last Name</b>
<b>Position</b>			
<b>Primary phone number</b>			
<b>Primary email</b>			

### Declaration

I hereby declare that all information and attachments included in this application are to the best of my knowledge true and correct. I understand that this is an application only and may not necessarily result in funding approval.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**