**ASIA-PACIFIC ACADEMY OF OPHTHALMOLOGY**

**PROJECT FUNDING APPLICATION FORM**

**Please complete the contact information, details of fund application and sign on the last page of the application.**

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| Year of Application: | 2019 |
| Project Title: |  |
| Has the applicant received grants from APAO for any long-term project?If yes, please specify & which year |  |
| Applicant/s Name:(Standing Committee/s & Project Team) |  |
| Team Member/s: |  |
| Contact Person/s: |  |
| Email Address: |  |
| Telephone No.: |  |
| Estimated Total Income: | US$  |
| Estimated Total Expenditure: | US$ |
| Amount anticipated by other sponsorship on the project (if any): | US$ |
| Amount Sought:\*(Estimated Total Expenditure − Estimated Total Income) | US$ |

|  |
| --- |
| **Official use** |
| **Ref no.**  |

*\*The amount sought should not exceed the stipulated grant ceiling set by the APAO Council.*

**FUND APPLICATION**

**Please fill in each of the following details regarding your fund application.**

|  |
| --- |
| **Project Summary** |
| **1. Objective/purpose of the project**:Please provide the objectives, content, organization, structure and the expected outcome of the project and state how the project fits within the APAO mission. [Max. 250 words] |
|  |
| **2. Timeframe:** Please provide preparation and implementation plans, timetable and milestones for your project. |
|  |
| **3. Finance Budget:** Please list out all sources of external funds and all financial costs incurred by the project. Usually the expenditure can include such costs as production, materials, venue rental, promotion and marketing, manpower and administration. Please follow the template on the following page and provide a breakdown of each main expenditure item. |
|  |

**BUDGET TEMPLATE**

|  |  |
| --- | --- |
| **Category** | **(US$)** |
| ***Estimated Expenses****\** |  |
| Production and Materials  |  |
| Venue Rental  |  |
| Promotion and Marketing  |  |
| Manpower |  |
| Administration |  |
| Others (please specify) |  |
| ***Subtotal:***  | ***(A)*** |
| ***Estimated Income – External Funds*** |  |
| Donation or Sponsorship (please specify) |  |
|  Others (please specify) |  |
| ***Subtotal:*** | ***(B)*** |
| Amount Sought:(Estimated Total Expenses − Estimated Total Income) | ***(B) – (A) = (C)*** |

*\*Please provide a detailed breakdown if necessary.*

**APPLICATION GUIDELINES**

1. All submitted applications (in total not more than 3 A4 pages) should be sent to the APAO Central Secretariat at apao-funding@apaophth.org.
2. All funding proposals are for one year only, renewable subject to endorsement by the APAO Executive Committee and Council after reviewing outcomes or deliverables from the project.
3. Normally a project should commence within one year after notification of the application results and should be completed within one year after commencement (excluding ongoing, long-term projects).
4. Financial supporting documents must be submitted for reimbursement claims from the project.
5. A full written report and financial report must be submitted to the Central Secretariat one month before the APAO Council meeting in the subsequent year after the approved project.
6. The project will be terminated by the APAO Executive Committee and/or Council if the applicant misuses the funds so as to contradict the objective of the approved project proposal and/or APAO mission.
7. The APAO Executive Committee reserves the final decision to judge the nature of the project and to assess whether or not to process the application.

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(SIGNATURE)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(NAME)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(POSITION)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(DATE)