**Expression of Interest Template**

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| **1. ORGANIZATION** | |
| **Name of Organisation:** |  |
| **Contact Details:**  (address, emails, phone number) |  |
| **Registration Status**  (State number and year of registration) |  |
| 1. **LOCAL WOMEN RIGHTS ORGANIZATIONS**   **a brief description of your organisation including its vision, mission and objectives max of 1 page)**   1. Vision/Mission/Goal (VMG) 2. What women’s rights issue(s) does your organization work on? (Thematic areas) 3. Geographic coverage 4. Organization’s governance and management structure 5. Please indicate the number of your staff, board, advisors, volunteers and members and provide breakdown by gender  |  |  |  |  | | --- | --- | --- | --- | | **Type** | **Total** | **Male** | **Female** | | **Board Members** |  |  |  | | **Management Staff** |  |  |  | | **Paid Staff** |  |  |  | | **Volunteers** |  |  |  | | **Members** |  |  |  | | |
| **B. COALITIONS/NETWORKS/MOVEMENTS**  **If you are applying as a coalition/network/movement, please complete the following information.**  **If you are applying as an individual organization, please skip this section.**   1. Name of the coalition/network/movement 2. Registration status 3. Thematic Focus 4. Governance/membership structure (please describe briefly how the coalition/network/movement is governed)  |  |  |  |  | | --- | --- | --- | --- | | **Type** | **Total** | **Male** | **Female** | | **Board Members** |  |  |  | | **Management Staff** |  |  |  | | **Paid Staff** |  |  |  | | **Volunteers** |  |  |  | | **Members** |  |  |  | | |
| **2. Provide a brief summary of what you want to do with the funding** | |
| Maximum 3 pages and should contain the following details   1. Describe the problem you seek to address 2. Describe the objectives you want to achieve 3. Describe how will the funding help strengthen your organisation 4. Risk management   **Core Operational Cost**  Describe operational cost your organization may wish to use the grant for and the budget. Note that up to 30% of the grant may be used to run core operational cost of the applying organisation. | |
| **3. Previous Experience** | |
| Brief description of previous experience relevant to the WVL project including source of funding/amount in the last three years | |