APPLICATION FORM YOUTH COOPERATION INITIATIVE 2016



TITLE OF THE PROJECT:		
NAME OF <u>APPLYING</u> ORGANIS.	ATION:	
ADRESS:	PHONE:	E-MAIL:
SHORT DESCRIPTION OF THE MA	AIN AREA OF WORK OF THE <u>APPLYING</u> ORG	SANISATION:
CONTACT PERSON AT THE API	PLYING ORGNISATION LAST NAME:	POSITION AT THE ORGANISATION:
PHONE:	E-MAIL:	
NAME OF <u>PARTNER</u> ORGANISA	ATION:	
ADRESS:	PHONE:	E-MAIL:
SHORT DESCRIPTION OF THE M	IAIN AREA OF WORK OF THE <u>PARTNER</u> ORG	ANISATION:
CONTACT PERSON AT THE PAR	RTNER ORGNISATION LAST NAME:	POSITION AT THE ORGANISATION:
		T COMOTATILE CINO, WIO, WIO.
PHONE:	E-MAIL:	



Description of how the two implementing organisations are connected to LSU (Sweden) and/or YETT (Zimbabwe), YAK (Kenya), YAP (Lebanon), RADA (Belarus), YCC (Cambodja), YOF (Turkey), EYF (Egypt) or NYC (Burma).			
APPLYING ORGANISATION'S ROLE IN THE PROJECT			
PARTNER ORGANISATION'S ROLE IN THE PROJECT			
Describe the composition of the project groupe in the <u>applying</u> organisation (age, role in organisation).			
Describe the composition of the project groupe in the <u>partner</u> organisation (age, role in organisation).			
Describes the approblem the president tries to solve:			
Describe the problem the project tries to solve:			

PLEASE FILL IN SIMPLE LFA - MATRIX

	INDICATORS	MEANS OF VERIFICATION	RISKS/ASSUMPTIONS
GOAL			
RESULTS			
ACTIVITIES			

Describe how the activities will contribute to the objactives
Describe when and where the project activities will be implamented (*the implementation period is between 1st of
June 2016 and the 1st of November 2016)
How did the project idea come up?
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BUDGET (*the maximum budget of the project is 40.000 SEK and can only cover costs directly linked to the project activities such as fuel and administrative costs. We do not pay for salary nor alcohol.)

BUDGET ITEM/ACTIVITY	BRIEF DESCRIPTION	COST PER UNIT (SEK)	NUMBER OF UNITS	TOTAL
1.				
2.				
3.				
0.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
TOTAL (SEK):				

Email the application form together with a letter of Intent (signed by each of the organisations`legal signaturies) to sara.ekenbjorn@lsu.se no later than the 15th of March.

The letter of Intent should outline the agreement to cooperate between the applying organisation and partner organisation, answering interogative questions about the cooperation such as what, when, where, who, why and how.

