*We strongly encourage you to take up discussions with a BACKUP Health advisor prior to submitting a proposal. Our team will be happy to explain the proposal procedure to you and advise on how to ensure that the proposal aligns with BACKUP Healths objectives. This will ensure that you do not fill out forms unnecessarily.*

**A. Partner information**

|  |
| --- |
| Name of contact person: Click or tap here to enter text.  Institution/organisation: Click or tap here to enter text.  Address: Click or tap here to enter text.  Country: Click or tap here to enter text.  Email: Click or tap here to enter text.  Phone: Click or tap here to enter text.  Date of issue: Click or tap here to enter text. |

**Please select the category that describes your organisation best:**

|  |  |
| --- | --- |
| CCM/ RCM | academic/training institution |
| regional or national civil society organisation | recipient of Global Fund/ other Global Health Initiatives |
| national government institution | private sector organisation |
| Other – please specify: Click or tap here to enter text. | |

**Is your organisation a registered legal entity?**

Yes  No

**If your organisation is not a registered legal entity, do you have a hosting agreement/MoU with another registered organisation which can receive funds on your behalf?**

Yes  No

**If your organisation implements grants from Global Fund/ other Global Health Initiatives:**

**Are you a …?**

principal recipient

sub-recipient

**Which institution(s) do you receive grants from?**

Click or tap here to enter text.

**Please specify the grants (title, volume and time frame) here:**

Click or tap here to enter text.

**B. Proposed support from BACKUP Health**

1. **Project title:** Click or tap here to enter text.
2. **Which type of resources do you require from BACKUP Health to implement this project?**

*We will provide feedback on the suitable modalities of support. Your proposal will be the basis for that, so we encourage you to indicate the type of support and estimate its extent as thoroughly as possible.*

**A) Support through consultants**

* Number of consultants: Click or tap here to enter text.
* National and/or international consultant(s): Click or tap here to enter text.  
  *If your project requires the support of an international consultant, please briefly explain the reasons in the section “Context” below. If you want to work with a team of consultants, we recommend including at least one national consultant.*
* Number of workdays per consultant: Click or tap here to enter text.
* If you want to work with one / several consultant(s), please fill out and attach, for each consultant:

Terms of reference for each consultant (BACKUP Health template)

Optional: list of proposed consultants

*Please note GIZ regulations on procurement of consultant services see download “Requirements on Procurement” in the section “GRANT AGREEMENT for non-German recipients” on the GIZ website* [*Financing: Contract management and contract processing - giz.de*](https://www.giz.de/en/workingwithgiz/34529.html)*.*

**B) Financial support**

* Financial volume of support:
* If you require financial support to implement this project, please fill out and attach:

Budget template see [GIZ website](https://www.giz.de/en/workingwithgiz/34529.html)

Confirmation of bank details see template provided in the section “GRANT AGREEMENT for non-German recipients” on the [GIZ website](https://www.giz.de/en/workingwithgiz/34529.html)

*You can find general information on GIZ financing support in the section “GRANT AGREEMENT for non-German recipients” on the GIZ website* [*Financing: Contract management and contract processing - giz.de*](https://www.giz.de/en/workingwithgiz/34529.html) *and in BACKUP Health’s Playbook on the website* [*www.giz.de/backup*](http://www.giz.de/backup)*.*

**C. Resources provided by partner**

*BACKUP Health support emphasizes the ownership of partners. We therefore encourage our partners to outline the resource they will commit themselves to a proposed measure. In case of proposals for financial support, please note that the resources listed here should not be included in the budget.*

1. **Can your organisation designate a staff member as co-facilitator/ focal point for the project implementation?**  
   *If possible, please identify the staff member and their estimated availability (e.g., 30% of a full-time position/ 10h per week).* ***Please name the staff position, not an individual’s name****. Please note that staff members listed here should not be included in a grant’s budget.*

Click or tap here to enter text.

1. **Which resources can your organisation contribute to the project?**

*Please outline the financial and human resources (beyond the focal point) that your organisation will contribute to the implementation of this project****. Please do not list the names of staff members, but only their position.*** *These can extend beyond human resources – for example, please list here venues, transport, software, office materials, etc. that your organisation will provide in support of the measure. Alternatively, please explain why your organisation cannot provide these.*

Click or tap here to enter text.

1. **Have you contacted another provider of technical support for a related matter?**

*If so, please specify which technical support provider you have contacted and briefly describe the project/resources you have discussed with them as well as the status of these discussions:*

Click or tap here to enter text.

**D. Project Proposal**

1. **Area of support**

*Please select the category/categories that best describe what your project relates to:*

**Strengthening community engagement**   
*Examples: Community-led monitoring (CLM), Mapping of community-led and community-based organizations, Creation and/or strengthening of platforms that improve coordination, joint planning and effective linkages between communities and health systems, Representation, participation and engagement of community actors in high-level health advisory or governing bodies, oversight committees and other decision-making fora, Community-led development/revision of strategies, plans, tools, resources and messages for social mobilization, Institutional capacity strengthening and leadership development, etc.*

**Improving governance and coordination**   
*Examples: Ensuring right policies, strategies, tools and information are available and accessible, supporting mapping and strengthening existing mechanisms/platforms, Joint planning and joint accountability mechanisms (financial and human resources), Support for coordination platforms with other partners (state and non-state), etc.*

**Integrated, people-centred health systems (IPHCS)**  
*Examples: Linking disease programmes and PHC, Diagnosis of governance-related and cross-programmatic inefficiencies, (Institutional) capacity strengthening for more integrated approaches, Intersectoral planning for health that addresses social determinants of health and the needs of vulnerable populations, Considering implications for resource allocation, Strategic planning on the role of the private sector in the expansion of integrated services, etc.*

1. **Context**

*Please describe the intended project and the underlying context as well as any challenge(s) that exist in the partner country/countries.*

Click or tap here to enter text.

1. **Beneficiaries**

*What is the target group of the proposed project? Please also estimate the number of beneficiaries.*

Click or tap here to enter text.

*How does the proposed project reach the target group?*

Click or tap here to enter text.

1. **Objectives**

Click or tap here to enter text.

1. **Activities**

|  |
| --- |
| 1. Click or tap here to enter text. |
| 1. Click or tap here to enter text. |
| 1. Click or tap here to enter text. |
| 1. Click or tap here to enter text. |
| 1. Click or tap here to enter text. |

1. **Milestones and Means of Verification**

Click or tap here to enter text.

1. **Outputs and project documentation**

Click or tap here to enter text.

1. **Sustainability**

*Please outline how the results are to be secured and maintained after completion of the project*

Click or tap here to enter text.

1. **Risks and mitigation measures for the implementation of the project**

*Please describe the technical, political and economic risks and challenges.*

Click or tap here to enter text.

1. **Risks and mitigation measures in relation to human rights and gender**

*Are there unintended negative consequences with regards to human rights and gender? If so, how can they be mitigated?*

Click or tap here to enter text.

*Does the proposed measure contribute to gender equality? If so, how?*

Click or tap here to enter text.

*Does the proposed measure address gender-specific needs? If so, how?*

Click or tap here to enter text.

*Does the proposed measure address specific needs of key and vulnerable populations? If so, how?*

Click or tap here to enter text.

**E. Supporting documents**

**For all proposals**

Endorsement form

**For proposals which include financial support**

Budget template see [GIZ website](https://www.giz.de/en/workingwithgiz/34529.html)

Confirmation of bank details see template provided in the section “GRANT AGREEMENT for non-German recipients” on the [GIZ website](https://www.giz.de/en/workingwithgiz/34529.html)

**For proposals which include support through consultants**

Terms of reference for each consultant (BACKUP Health template)

Optional: list of proposed consultants

**F. Ethics and whistleblower policy**

GIZ, as a federal company, is obligated to uphold the values of the constitution of the Federal Republic of Germany, as well as other commissioners, such as the Foreign Commonwealth and Development Office and the Swiss Development Cooperation, and we advocate for human rights, equal opportunities and integrity as well as fair handling of conflicting interests and goals.

BACKUP Health has zero tolerance for inaction approach to tackling sexual exploitation, abuse and sexual harassment (SEAH). This means that BACKUP Health expects all implementing partners to take all reasonable and adequate steps to prevent SEAH of any person linked to the implementation of BACKUP Health measures and respond appropriately when reports of SEAH arise. BACKUP Health also aligns with the Inter-Agency Standing Committee’s [Six Core Principles](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Finteragencystandingcommittee.org%2Fsystem%2Ffiles%2Fiasc_six_core_principles_relating_to_sexual_exploitation_and_abuse_sept_2019.pdf&data=04%7C01%7Ckatrin.hartmann%40giz.de%7Cd2a0dbc048b14661fa1a08d9572c30cb%7C5bbab28cdef3460488225e707da8dba8%7C0%7C0%7C637636669563328620%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=%2B5qKAUxmeeEhYZ3vSLLr1xq8eugTOHuaLTMH7lD5QE8%3D&reserved=0) relating to Sexual Exploitation and Abuse, and expects its implementing partners to promptly report to BACKUP Health any SEAH related allegation credible enough to warrant an investigation.

To live up to this standard, to identify flaws in the system as well as malpractices by individuals and thereby to avoid harm both inside and outside the company, GIZ established a whistleblower portal, which serves as a communication channel for reports concerning serious violations of these values. Anyone can use this portal to report misconduct and malpractices, whether on the part of GIZ or within the scope of a GIZ-supported activity. Reports can be submitted completely anonymously.

Please acknowledge that you have understood that your organisation can report any violations of abovementioned values that occurred within the context of GIZ-funding confidentially through this portal under the following link: <https://www.bkms-system.com/bkwebanon/report/clientInfo?cin=26zig7&c=-1&language=eng>

Please confirm that your organisation has written processes and/or policies in place to ensure safeguarding against sexual exploitation, abuse and sexual harassment, which can be provided upon request.

**G. Annex: Time frames**

1. **Time frame of the project:**

|  |  |
| --- | --- |
| Proposed start date *(earliest: four weeks from submission of project proposal form)*: | Proposed end date: |
| Click or tap here to enter text. | Click or tap here to enter text. |

Minimum time frame required for implementation (in days/ months): Click or tap here to enter text.

1. **Activities**

*Please insert here all activities as stated above and add information about their implementation time frame.*

|  |  |
| --- | --- |
| **Activity** | **Implementation time frame** |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
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