

USAID Lebanon Civic Action Accelerator Program (LEB-CAAP)

Catalyst Fund for Relief and Response

Annual Program Statement (APS)

[Attachment I: Application Form](#)

General Information

Name of Organization (English)
Name of Organization (Arabic)
Organization Registration Number
Address of the Organization (Headquarter): Street Address: City/ Area: Main Telephone Number: Website (if available):
Governorate: (drop down list) Geographic Zone: (drop down list)
Executive Director: Name: Email: Mobile number: President of the Board (if available): Name: Email: Mobile number:
Main contact person responsible for managing the proposed project: Name: Position: Email: Mobile number:
Number of Staff Full time: Part time: Volunteers:

Main Areas of Specialization: (drop down list)

- Education
- Health
- Culture, Arts and Sports
- Economic development and empowerment
- Environment
- Democracy and Governance
- Rights and Freedoms
- Relief, Response, and Humanitarian Assistance
- Support of Civil Society Organizations studies and research.
- Capacity Building and Learning
- Peace and Security
- Other – please specify:

Geographies covered by Relief and Response Interventions**Annual Budget (Year 2021)****Organization capacity and history**

- What is the organization's main mission?
- Describe your organization's work in Relief and Response during the past two years.
- When did your organization first launch their relief and response activities?
- Are you currently a recipient of other donors' funding?
- If yes, list your donors in the past 3 years, the amount and purpose?
Donor Organization:
Grant/Project Title:
Amount of funding (USD):
Funding period (Start/End Dates):
Name and Title of contact:
Telephone of contact:
Email of contact:

Inclusion and Reach

- How many beneficiaries benefited from your relief and response services in 2021?
- Do you serve marginalized groups (women, LGBTQIA, youth, PWD) as part of your current operation? If yes, please specify (drop down list – with corresponding number for each)
- How do you select your own beneficiaries? State your selection criteria.
- How do you ensure participation from women, LGBTQIA, youth and PWD? Do the tools and methods you currently use support the inclusion of these groups? Please describe.

- What are the challenges you face in providing/expanding your service to each of the marginalized groups you serve?

Problem Statement

- What is the community problem your CSO is trying to address?
- Why is addressing this problem a current priority?
- How is your CSO responding to this community problem? Describe the service (or range of services) related to relief and response that your CSO provide.
- How did the compounded crises that hit Lebanon in the past years affect your service provision? (state your challenges in terms of outreach, quality, etc.)
- What does your organization need to maintain and improve its services?

Proposed Intervention and Impact

- What is the proposed intervention you would like to implement with CFRR grant? Provide a detailed description of the activities, services or goods the organization is requesting through the grant.
- How will the proposed intervention impact your service provision? Your answer should explain how the items included in your budget will directly address the challenges identified in the previous section.
- Describe the anticipated results in terms of enhanced effectiveness, efficiency and inclusivity of relief and response services.
- Which communities/geographies do you plan to target with the CFRR grant?
- How many beneficiaries will you serve/impact with CFRR grant?
- Will CFRR grant help you address and better respond to the specific needs of marginalized groups? If yes, describe how.
- How will you sustain LEB CAAP's support beyond the timeframe of the grant?
- Do you plan to include informal groups in your proposed intervention? If yes, describe the level at which they will be involved and how (example: Outreach to new areas or marginalized groups, capacity building and transfer of skills, etc.)
- If applicable, how does the proposed intervention (including the requested budget items) complement other donor supported activities within your organization (ex: cost share, etc.)

Monitoring and Evaluation

- How do you measure the impact of your relief and response efforts?

- How will you measure the impact of the CFRR grant and what indicators will you use?
- Is there a dedicated person for M&E or data collection and reporting?

Implementation Plan and Budget

- List the CFRR funded activities that will be implemented over the duration of the project in the table below and put an X in the boxes to indicate the quarter during which the activity will take place (when applicable).

	Implementation Period (Quarters)			
Activity	1	2	3	4
1.	X			
2.				
3.				

- Complete the budget (Attachment II) and submit it along with procurement supporting documents (ex: quotations) as part of the application package. Refer to the budget template and instructions for guidance.