**Application**

**A1: Partner identification**

**Maximum amount: DKK 65,000[[1]](#footnote-1)**

# Cover page

|  |  |
| --- | --- |
| **Danish applicant organisation** (Financially responsible): |  |
| **Contact person** for the Danish organisation: | Name:  Email adress:  Telephone number: |
| **Additional Danish partner organisation(s):** |  |
| **Partner organisation(s) in country(ies) of cooperation:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Title:** |  | | |
| **Country(ies) of cooperation:** |  | | |
| **Time period:** | **Start** date:  Click to insert date | **Completion** date:  Click to insert date | Total number of days: |
| **Amount applied for:** | **Total amount:**  DKK: | **Of which, disability compensation:**  DKK: | |
| **Signature of applicant organisation’s legally authorised representative:**  The signature **attests to** the organisation’s commitment to the partnership and to the present application for a **partner identification** and confirms that it is in conformity with the Disability Fund’s guidelines, including financial requirements. It also **confirms** that the signatory legally represents the organisation. | |  |  |  | | --- | --- | --- | | Click to insert date |  |  | | Date |  | Signature of legally authorised representative |   Place Name of representative (block letters) | | |

|  |  |
| --- | --- |
| **Is this a case of:**  (several boxes can be checked) | New country(ies) of cooperation  New partner(s)  Other: |
| **Is this a re-submission?** (I.e. a revised version of a previously submitted application) | No  Yes, last submission was on date/year: |
| **Would you prefer the assessment of your application in:** | Danish  English |
| **Have you received advice from DPOD in relation to this application?** | Yes  No |
| **Synthesis**  (Brief description of the intervention (preferably in Danish), max. 150 words. This will be used as a presentation of the pre-study on DPOD’s website.) | |

##### **Guide**

##### **The application is composed of the following parts:**

##### **Cover page**

##### Key information about the applicant(s) and intervention to be funded, as well as the signature of the Danish applicant organisation’s legal representative.

##### **Part I** **Application text**. This must describe:

##### ● The potential partner

##### ● Objective, programme and participants

##### ● Follow-up to the intervention

##### The application text should be written with sufficient detail to be understood by an outsider without prior knowledge of the context or applicant.

##### For each question, there is an explanatory text or sub-questions written on grey background. As in the case of this text, **all text on a pale green background** is intended as a guide. We recommend that you **delete it before submitting** the application. This will make it easier for you to keep track of the actual number of pages in part I.

##### **TIP:** You can easily delete all the text on a pale green background in one go – Open ‘home’ (startside) and find styles (typografier) – right click on the style “Heading 5”(overskrift 5) press ‘select all’ (‘vælg alle forekomster’). Now press delete on your keyboard. This can preferably be done when all text in the application has been written.

##### **Part II** **List of annexes:** Here we ask you to itemise obligatory and supplementary annexes substantiating the application, including budget and budget notes.

##### **Part III** **Checklist**: This last part consists of items to be checked off before submission to make sure the application is not rejected on administrative grounds.

##### **Advice and assistance:** The **Guidelines for the Disability Fund**, which are available at [handicap.dk/internationalt-samarbejde](https://handicap.dk/internationalt-samarbejde), provide tips on the application process, how to craft a good project, and explanation of conditions and requirements which apply to each type of application. Moreover, **DPOD’s advisors** are always ready to assist. They can be reached by email at: [ais@handicap.dk](mailto:ais@handicap.dk).

##### **Submission of application:**

##### The application including checklist and obligatory annexes should be submitted to: [ansogning@handicap.dk](mailto:ansogning@handicap.dk)

##### Applications can be submitted at any time.

# I. Application text *(max length: 5 pages)*

## The potential partner(s)

### 1.a The potential partner(s)

* **What has made you interested in this/these particular partner(s)? How and when was contact between you and the partner(s) established? On what basis have you chosen to visit the partner(s)?**

#### What do you know about the partner(s) at this point and how did you obtain this knowledge? Have you been in contact with other *stakeholders* that know the partner (please elaborate)?

## The partner identification

### 2.a Participants

#### Describe who will participate in the visit from the Danish organisation, their connection to the Danish organisation, their qualifications / prerequisites (relevant to this particular task), as well as their expected role in a future project.

#### Who is your contact person(s) within the partner organisation, what is their role within the organisation, as well as their role in planning this visit?

### 2.b Purpose, programme and outcome

##### [Please describe the purpose and contents of the partner identification visit, including which activities you have planned, and what questions and themes you expect to focus on.]

#### What is the purpose of the partner identification? Which questions do you hope to clarify?

#### Describe the programme for the visit and who you will be meeting with.

##### [Please attach a detailed programme, while only covering the overall contents of the programme here, including who you will be meeting with – both from the potential partner (secretariat, board of directors), as well as other actors that work with or are familiar with the potential partner (e.g., other OPDs or civil society actors, local authorities, donors etc.)]

#### Which activities have you planned and which methods / tools will you be using, to increase mutual understanding of each other’s organisations, expectations, values and common interests for future cooperation?

#### How will you ascertain the capacity of your potential partner during the visit?

##### [Capacity is here understood as the organisation’s financial capacity and human resources, such as financial capacity, governance, staff and volunteers, as well as legitimacy with regards to legal status, membership base and democratic structure.]

### 2.c Information in Denmark

##### [You are encouraged to make use of the opportunity to do information work in Denmark. This could involve campaigns, posts on social media, newsletters, and communication targeted at members of your organisation or the general public. To this end, you can apply for an amount of up to 2% of total project costs (budgets items 1-8).]

#### Are you applying for funds to cover information work in Denmark?

**Yes  No**

#### If yes. please describe the information you plan to do in relation to the pre-study, who the target group will be, expected reach and means of communication.

## The future process

##### [The partnership identification process should ideally lead to a formal partnership and the development of a project cooperation.]

### 3.a Following up on the partner identification

#### Please describe your plans and ideas for the process following the partner identification, including the decision-making process determining if a formal partnership is established.

##### [Please include your thoughts about who is responsible for making this decision as well as the time frame.]

### 3.b Embedding within the Danish organisation

#### How will a future partnership be embedded in the Danish organisation (e.g., within the secretariat or a project committee)?

# II. Annexes

## Obligatory annexes[[2]](#footnote-2)

1. Budget format A
2. Preliminary programme
3. ”Medansøger på ansøgninger”[[3]](#footnote-3)

## Supplementary annexes

Supplementary annexes should not be submitted with the application,but can be listed below. They can be requested by DPOD’s appropriation committee if deemed necessary.

|  |  |
| --- | --- |
| Annex | Annex title: |
| D. |  |
| Etc. |  |

# III. Checklist

The checklist is an obligatory part of the application with the aim of ensuring that all administrative requirements are met. The checklist is therefore intended as an aid in the application process to avoid having the application returned due to minor errors or omissions.

## 1. Application

|  |  |  |
| --- | --- | --- |
|  | Yes | Remark |
| All questions have been answered (**cover page and Part I-II).** |  |  |
| Part I of the application adheres to the **indicated max length.** |  |  |
| All **explanatory text** (marked with grey background, italics, and square brackets) has been erased. |  |  |
| A **project synthesis** in Danish has been included on the cover page. |  |  |
| All replies have been written in the font ***Arial size 11****, line spacing 1,0, margins: top 3 cm, bottom 3 cm, right 2 cm, left 2 cm.* |  |  |
| A legally authorised representative of the Danish organisation has **signed** the cover page. |  |  |

## 1.b Budget

|  |  |  |
| --- | --- | --- |
|  | Yes | Remark |
| The **correct Budget Format (A)** has been used. |  |  |
| **The budget figure** on the cover page of the application (“Amount applied for”) **mirrors** the total in the annexed budget. |  |  |
| **Budget Format, spreadsheet 1**: Budget and budget notes: | Yes | Remark |
| Relevant budget notes have been inserted. |  |  |

|  |  |  |
| --- | --- | --- |
| **Budget Format, spreadsheet 3**: Disability compensation | Yes | Remark |
| If disability compensation has been applied for, this spreadsheet has been completed. |  |  |

## 1.c Annexes

|  |  |  |
| --- | --- | --- |
|  | Yes | Remark |
| **Obligatory annexes** have been attached – see list in Part II of the application form. |  |  |
| All other relevant **supplementary annexes** have been listed and can be sent on request. |  |  |
| The electronic files of all **annexes have been named in alphabetic order** |  |  |

1. The budget limit can be increased by up to **DKK 20.000 for each additional Danish organisation** taking part in the partner identification. In case of more than one Danish applicant, the annex “medansøger på ansøgninger” must be filled out and submitted along with the application. [↑](#footnote-ref-1)
2. Templates for most annexes can be found at [handicap.dk/internationalt-samarbejde](https://handicap.dk/internationalt-samarbejde/handicappuljen/) [↑](#footnote-ref-2)
3. Only applicable in case of more than one Danish applicant [↑](#footnote-ref-3)