**Open Call for Proposals for Support to Civil Society Organizations and Media for EU Integration Projects**

**APPLICATION CHECKLIST**

|  |
| --- |
| BEFORE SENDING YOUR APPLICATION, PLEASE CHECK THAT EACH OF THE FOLLOWING DOCUMENTS IS COMPLETED AND ENCLOSED |

|  | **Yes** | **No** |
| --- | --- | --- |
| 1. Completed **Grant** **Application Form** is enclosed in editable Word format and in scanned (signed, stamped by the authorized person) PDF format |  |  |
| 1. Completed Project **Budget Form** is enclosed in editable Excel format and in scanned (signed, stamped by the authorized person) PDF format |  |  |
| 1. Completed **Sources of Funding Budget form** is enclosed in editable Excel format and in scanned (signed, stamped by the authorized person) PDF format |  |  |
| 1. Completed Project **Budget Narrative form** is enclosed in editable Excel format and in scanned (signed, stamped by the authorized person) PDF format |  |  |
| 1. Completed **Log Frame form** is enclosed in editable Excel format and in scanned (signed, stamped by the authorized person) PDF format |  |  |
| 1. **CSO’s Factsheet** / **Media Factsheet** form is completed and enclosed |  |  |
| 1. **Statement of the Applicant** is completed and enclosed |  |  |
| 1. **Application Checklist** is completed and enclosed |  |  |
| 1. **CV** **of the person responsible for implementation** (project manager) and **CV of other key members** of team is enclosed |  |  |
| 1. Original or certified copy of the **CSO’s/Media** **legal registration documents** not older than 3 months enclosed |  |  |
| 1. Certified copy of the **CSO’s Statute** enclosed |  |  |
| 1. Certified copy of the CSO**’s constitutional document** (only if it is not the same document as the Statute) enclosed |  |  |
| 1. **ONLY lead Applicant**: Copy of **applicant Tax Identification Number certification document** enclosed |  |  |
| 1. **ONLY lead Applicant**: Copy of the **applicant accounts for 2017 and 2018** (the profit and loss account and the balance sheet) enclosed |  |  |
| 1. **ONLY lead Applicant: Act on appointment** of person(s) authorized to represent applicant, only if authorized representative(s) is (are) not listed in the legal registration document |  |  |
| 1. **ONLY lead Applicant:** signatures of authorized persons certified by competent authority (original or certified copy) enclosed |  |  |
| 1. IF APPLICABLE: **Partnership Agreement** signed by all legal representatives is enclosed |  |  |