



Asia Pacific Region

World Association  
of Girl Guides  
and Girl Scouts

Association mondiale  
des Guides et des  
Eclaireuses

Asociación  
Mundial de las  
Guías Scouts

## ASIA PACIFIC REGION PROJECT 3L APPLICATION FORM 2015

*To be completed and returned by 30 November of each year to:  
Regional Director, Asia Pacific Region, WAGGGS*

### 1. GENERAL INFORMATION

1.1	Name of National Organization
1.2	Brief background of country relating to status of girls and young women (no more than 200 words)
1.3	Total population of the country and population of young women of the project age group
1.4	Brief outline of Girl Guiding/Girl Scouting programme offered by Member Organization for young women of the project age group (no more than 200 words)
1.5	Membership census of young women of the project age group in Member Organization
1.6	Skill/s needed by young women members of the project age group identified by Member Organization

## 2. DESCRIPTION OF THE PROJECT

2.1	Title of Project
2.2	What are the goals and objectives of the project?
2.3	What are the expected results? (These must be measurable and should directly benefit young women, contributing to their needs and be relevant to their personal development.)
2.4	What are the planned project activities?
2.5	Project is conducted at which level? (National, Regional, Province, State etc)
2.6	Proposed location/s of project
2.7	What is the participant age range in this project?
2.8	What is the number of the expected beneficiaries (direct and indirect)?
2.9	What is the expected date of commencement?
2.10	What is the expected duration of the project?

2.11	Who are the partners of your project (if any)?
2.12	How will the project be implemented? Show this using a work plan. Highlight the expected outcomes in 3 months, 6 months, 9 months and 12 months.
2.13	What contribution will the Member Organization provide; such as funding, staffing, resources?
2.14	How will the project be monitored?

### 3. BUDGET

Attach separately a detailed budget showing estimated cost (including breakdown of all expenses) of each activity/step of the project and estimated income (including contribution by Member Organization and other sources of income). Budget should ideally been shown in local currency and/or GBP. Please indicate whether the income has already been raised or promised.

### 4. PERSON RESPONSIBLE FOR THE IMPLEMENTATION OF THE PROJECT

4.1	Name :
4.2	Position in Organization:
4.3	Contact details (office phone number, mobile phone number and email address) :

**5. Other Comments**

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**6. Project Application Authorisation**

<b>Name of Person writing and submitting this Project Application</b>	
<b>Signature</b>	
<b>Position/Role of Nominating Person</b>	
<b>Date</b>	

September 2015