Project Proposal Form

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| Project summary |
| Project name |       |
| Project originator |       |
| Project rationale |       *Note how this project will contribute to trachoma elimination* |
| Timings (est) | *Likely start and duration* |
| Costs (est) | *Attach cost breakdown/ quotations* |

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| community stakeholders |
| Community |       |
| Contact name/s and role/s |       |
| Best means of contact (ph/email) |       |
| Trachoma rating  |      *Prevalence/ Priority i.e.high/med/low* |
| Govt support/other funding |      *Confirm any other funding or support from responsible parties* |

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| OTHER STAKEHOLDERS |
| Organisation |       |
| Contact name |       |
| Address |       |
| Phone |       |
| Email |       |

\*List additional stakeholders if others

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| Project processes |
| Rationale |
|      *How the project emerged, relevance and usefulness, anticipated benefits* |
| Inputs |
|      *Resources required, who is providing them, cultural appropriateness, sustainability* |
| Delivery |
|      *How the resources will be delivered, timeline for execution, monitoring and evaluation* |
| Outcomes |
|      *Specific outcomes of project, benefits to community, impact on trachoma elimination, future monitoring* |

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| Risk assessment |  |
| Potential risks | **Mitigation strategies** |
|       |       |

*All interested parties should sign and date this document prior to submission.*

*Further enquiries and submissions can be made to Project Manager Lien Trinh: lien@endtrachoma2020.org.au.*

*Submissions will be considered if delivery and full implementation is possible prior to 31 December 2020*