**SANPUD’s Double-or-Quits Initiative Program**

**June 2021 – September 2021**

*Proposal & Budget Form*

*Deadline for submission: 18 June 2021, 17:00.*

Please submit this form along with ID copies and proof of bank account to

* MJ Stowe, SANPUD Project Manager [mj@sanpud.org](mailto:mj@sanpud.org)
* Precious Zaba, SANPUD Change Facilitator [precious@sanpud.org](mailto:precious@sanpud.org)

1. **Contact Details**

|  |  |  |
| --- | --- | --- |
| Applicant | Name of Network: | |
| Application Date |  | |
| Province |  | |
| Area/City |  | |
| Network appointed Contact person’s details 1 | First name |  |
| Last name |  |
| Mobile phone |  |
| Gender |  |
| Bank account (Y/N) |  |
| Network appointed Contact person’s details 2 | First name |  |
| Last name |  |
| Email |  |
| Mobile phone |  |
| Gender |  |
| Bank account (Y/N) |  |

1. **Information about the proposed business**
   1. **Business description**

*Please describe what the business is - what, where, when, how? (100-250 words)*

* 1. **Business goals & plan**

*What do you want to achieve with this business (50-150 words)?*

*How will you achieve these goals/run the business (50-150 words)?*

*How will you ensure that this business is sustainable and that it will continue after the final disbursement is made (50-150 words)?*

* 1. **Describe how people who use drugs will be involved in your business?**

*Please describe how people who use drugs participate in the activities and decision making of the business (50-150 words)*

* 1. **Why should this proposal be chosen?**

*Please describe your experiences as to why this proposal should be chosen (100-200 words)*

1. **Budget**

**How does your network plan to manage this budget?**

*(in 50-250 words)*

**How does your network plan to hold the points of contact accountable for the funds and this budget?**

*(in 50-250 words)*

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| Item | Description | Cost | Units/amount | Total | Comments |
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| Grand Total: | | | |  |  |

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| **Reporting** | |
| Upon selection by external reviewers the two selected networks will be notified of their success and asked to submit an invoice to SANPUD for disbursement 1. No disbursement can be made without an invoice. A template will be made available. | |
| Due by 15 August 2021; Progress report and supporting documents   * Progress report (what has happened, what has been procured, successes and challenges, what has been spent, what has been earned) * Slips and receipts for items bought * Photographs of items/activities/work done * Invoice for disbursement 2 | |
| A final report will be due on the 01 September 2021.  Please note that NO late reporting will be accepted. Any network who fails to submit their final report on, or by the 01 September 2021, will be disqualified.  Final Report is to contain further photos, a summary of the whole business implementation plan detailing the activities, outcomes, lessons learnt and how SANPUD could assist going forward. A complete report on the finances and expenses is also required showing how funds were spent and what your profits were. | |
| **Appointed Contact Name & Surname 1:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** I am signing on behalf, and with the full approval of, my network to apply for the Double or Quits Business proposal |
| **Appointed Contact Name & Surname 2:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** I am signing on behalf, and with the full approval of, my network to apply for the Double or Quits Business proposal |