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instructions

## *Before completing this form, it is important that you read the Programme Leaflet and selection criteria on* [*Echonet*](https://echonet.bnpparibas/pages/60f8e2e8e419ed13ee7d9c82/)*.*

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| Please also note:  * This application form **must be completed by the staff applicant**; * This application form **must be completed in English and submitted by** [**email**](mailto:help2helpapac@asia.bnpparibas.com?subject=2021%20Help2Help%20Application) – please note that this is the mailbox for submission of applications only. **Please contact** [**your local CSR Correspondents**](https://echonet.bnpparibas/pages/5e1ea68cc133fcd13e5f0962) **for enquiries**; * Sufficient information must be given for the APAC CSR Council and Territory CSR Committee to evaluate the merits of the proposed project. **Incomplete applications will not be processed;** * A charity and its project can receive Help2Help grants for up to two consecutive years. |

## Application Deadline

### Completed forms should be submitted by [email](mailto:help2helpapac@asia.bnpparibas.com?subject=2019%20Help2Help%20-%20Application) on/before 30 September 2021. Under no circumstances will a grant be considered at any other time.

### APAC CSR Council and your local CSR Committee will evaluate the applications and results will be announced around January 2022. Successful applicants will be informed individually.

### **Application Checklist:**

Remember to attach the necessary documents:

* **Your partner charity:**
  + Last financial report
  + Copy of the organisation’s registration
  + Last annual activity report
* **Your submitted project:** 
  + Full Project Budget

## YOUR WORK CONTACT:

|  |  |  |
| --- | --- | --- |
| 1. | Your Location  (where your office is located, e.g. HK) | Choose your location |
| 2. | Your Name |  |
| 3. | Your Department/Entity |  |

## YOUR SUPPORTING CHARITY:

## I. ORGANISATION DETAILS

|  |  |  |
| --- | --- | --- |
| 1. | Organisation Name: |  |
| 2. | Year of Establishment: |  |
| 3. | Has the organisation previously operated under other names? |  |
| If yes, what is the organisation’s previous name(s)? |  |
| What are the reasons for such changes? |  |
| 4. | Operation Location(s)[[1]](#footnote-1): |  |
| 5. | Website Address: |  |
| 6. | Date of this application: | Choose the date |
| 7. | Is the organisation regulated/registered as a Charitable Institution? | Yes No |
| If the answer is yes, please state:   1. Registered charity’s number: 2. Location of Registration: 3. FCRA registration number (India only): 4. Year of Registration: | |
| 8. | Please state the organisation’s mission and objectives (**up to 100 words**): | |

## II. GOVERNANCE

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| --- | --- | --- | --- |
| 1. | Name of Founder: |  | |
| 2. | Background of Founder (up to 50 words): | | |
| 3. | Information of Board/Executive Committee (up to 3 members): | | |
| Name (1): |  | |
| Background (up to 50 words): | | |
| Name (2): |  | |
| Background (up to 50 words): | | |
| Name (3): |  | |
| Background (up to 50 words): | | |
| 4. | Information of Senior Management e.g. CEO, Directors  (limit to 2 members): | | |
| Name (1): |  | |
| Brief Background: |  | |
| Years of Service: |  | |
| Key Responsibilities (up to 50 words): | | |
| Name (2): |  | |
| Brief Background: |  | |
| Years of Service: |  | |
| Key Responsibilities (up to 50 words): | | |
| 5. | Is there a regular rotation of members within the Board/Executive Committee? How frequent is the rotation? (Please provide an organisational chart) | | |
| 6. | Number of Employees in the Organisation: | | |
| Full Time: |  | |
| Part Time: |  | |
| 7. | Please complete a governance statement similar to the sample given below.  *All donation funds are managed directly by [Organisation], usage approved by the Board of Trustees/Directors and overseen by the Audit Committee. Financial accounts are audited yearly by independent professional auditors.*  Governance Statement: | | |
| 8. | Are there any BNP Paribas’ employees serve at the organisation’s Board/Executive Committee? | | Yes No |
| If yes, please provide his/her full name(s) | |  |
| 9. | Is this organisation our client? | | Yes No |
| 10. | To the best of your knowledge, are you aware of any board members and/or the controlling parties of this organisation to be closely related to our client? | | Yes No |

## III. FINANCIAL STABILITY

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| 1. | Please attach (a) Balance Sheet and (b) Profit and Loss Account of the Organisation for the past year, showing the main sources of revenue (e.g. government subvention, fund raising), major expense items (e.g. fund raising, administrative costs) and level of reserve. | |
| 2. | Please elaborate on the policy for accumulating and utilising reserve: | |
| 3. | Were there any audit findings from independent auditors or regulators? |  |
| If yes, what were the remedial actions taken? |  |
| Were there any disciplinary action from the regulators in the past 5 years? |  |

## IV. SERVICES

|  |  |  |
| --- | --- | --- |
| 1. | Please describe the core services of the organisation in terms of:  a) the problem they are designed to tackle; b) how the problem is identified; and c) notable accomplishments or learnings. | |
| 2. | In relation to the problems identified above, what is the local authority / other non-government organisations / indigenous people doing? In your analysis, why is there a gap to be filled by this organisation? Is there overlap in the service? | |
| 3. | Other than the organisation’s charity related operations, is the organisation also involved partly/wholly in For Profits Activities? (e.g. other profit-making subsidiaries/businesses such as construction, logistics, shipping, security and/or others) | Yes No |
| If yes, please provide the co’s name(s) |  |

## YOUR COMMITMENT WITH THE CHARITY:

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| --- | --- | --- |
| 1. | Reasons for your commitment. Why this charity? |  |
| 2. | When did you start working with this charity? |  |
| 3. | What are your role(s) at this charity (e.g. volunteer, fundraiser, committee member)? |  |
| 4. | What are the charity’s projects/activities that you have participated in? |  |
| 5. | On a yearly basis, have you contributed at least 50 hours of volunteer service (on average) at this charity? | Yes No |

## YOUR PROJECT:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. | **Project Name:** |  | | | | |
| 2. | **Is this a new project?** | Yes No | | | | |
| 3. | **If this is an existing project, how long has it been in operation?** | | | |  | |
| 4. | **What is the proposed project period?** | | | | | |
| From (month/year) | | To (month/year) | | | |
| 5. | **Project Description**: | | | | | |
| 1. Project background (how and why this project was born) | | | | | |
| 1. Project objectives (should be specific, measurable, attainable, relevant and timely) | | | | | |
| 1. Project plan (planned activities and timeframe) | | | | | |
| 6. | **Project Beneficiaries**: | | | | | |
| 1. Who are the project’s beneficiaries? | | | | | | |
| 1. Where are the project’s beneficiaries located? | | | | | | |
| 1. How many direct beneficiaries are there? | | | | | | |
| 1. What are the selection criteria of the project’s beneficiaries? | | | | | | |
| 1. Any due diligence has been/will be performed on the project’s beneficiaries? | | | | | | |
| 7. | **Project Evaluation**: | | | | | | |
| 1. What are the key deliverables and outcome indicators (the information that can be used to evaluate the results of the project – they should be measurable, achievable and consistent)? | | | | | | |
| 1. What are the expected short-term measurable impacts? | | | | | | |
| 1. What are the expected long-term measurable impacts? | | | | | | |
| 8. | **Project Funding**: | | | | | | |
| 1. Requested funding from BNP Paribas (**cannot exceed €4,000**):   € | | | | | | |
| 1. Provisional Budget (the allocation of the above requested funding – it should be reasonable and well-planned): | | | | | | |
| 1. What is the ratio/percentage of the donation that will go to the beneficiary? (e.g. project outcome vs. operational costs) | | | | | | |
| 1. Please indicate if the organisation:   Has also successfully applied for sponsorship for this project from other sources. If the answer is yes, please state the amount granted:    If it is in the process of applying or intends to apply for other sponsorships for this project, please state the amount applied or to be applied: | | | | | | |
| 9. | **Others:** | | | | | | |
| 1. Please state the organisation’s relevant experience in connection with the project (please specify the number of years in organising similar projects). If not a new project, what were the notable accomplishments or learnings? How is this project different from previous iterations: | | | | | | |
| 1. Are there any volunteering opportunities for BNP Paribas employees? Yes No | | | | | | |
| If yes, please specify (the type of volunteering work, number of volunteers and time involved) | | | | | | |
| 1. Please include any other information which you think is relevant to this application: | | | | | | |
| 1. Please confirm that this charitable initiative to support this project comes solely from you and it is not based on the request from a public official, client, intermediary, vendor or any other third party. | | | | | Yes, I confirm | |
| 10. | **The Organisation’s Project Contact Person:** | | | | | | |
| Name:  Position:  Contact Number:  Email: | | | Name:  Position:  Contact Number:  Email: | | | |

1. Please include all territories that your organisation operates (If there is not enough space to provide all the necessary information, please list the info on an extra sheet of paper) [↑](#footnote-ref-1)