



MINISTRY OF AGRICULTURE AND LIVESTOCK DEVELOPMENT

STATE DEPARTMENT FOR LIVESTOCK DEVELOPMENT

KENYA LIVESTOCK COMMERCIALIZATION PROJECT (KELCOP)

P.O. Box 12261, 20100, Nakuru, Kenya

Grants Proposal Application Form (THIS FORM IS NOT FOR SALE)

For official Use only

Name of the Beneficiary Group:	
Proposal Reference No:	
Window Applied for:	
Date Received:	

Instructions

Please read this application form and information document on the **Call for Proposals (CFP) guidelines** carefully before you fill this proposal application form. The application forms should be filled in **English**. Filling this form is **not a guarantee** that your project will be funded. **The proposal from the Groups must be either bound or spiral bound**

Requirements

- The application form for proposal is only to be filled and submitted by applicants who meet the general and specific criteria as indicated in the "call for proposals".*
- It is important to attach all the required documents as proof that all the requirements have been met.*
- All proposals must be endorsed by the SLCAC, Sub-County Livestock Officer, and Ward Extension Staff before they are submitted to the County Project Coordinator's office.*

I, The County Project Coordinator of..... The county confirms that the proposed project as stated in this Proposal Application Form is in line with the objectives and priorities of the Kenya Livestock Commercialization Project (KeLCoP)

Name:..... Date:.....

Signature: Official Stamp:.....

Background Information

Name of the Group		
Group Registration No.		
Contact Address		
Date of Registration		
Type of registration		
Number of Group members (Men, Women)		
Number of households		
County		
Sub-County		
Ward		
SLCAC		
Nearest trading centre		
Has the group been funded by KeLCoP earlier	If yes.... When	No.....

Details of the Group Executive Committee

Name of Chairperson	
Telephone number of Chairperson	
Duration in office -	
Name of Secretary	
Telephone number of Secretary	
Duration in office	
Name of Treasurer	
Telephone number of Treasurer	
Duration in office	

Details of the SLCAC Executive Committee

Name of Chairperson	
Telephone number of Chairperson	
Signature	
Name of Secretary	
Telephone number of the Secretary	
Signature	
Name of Treasurer	
Telephone number of Treasurer	
Signature	

Group Bank Details

Bank Name	
Branch Name	
Branch Code	
Account Name	
Account Number	

Group Account Signatories

Signatory 1	
Name (Full Names)	
ID number	
Signatory 2	
Name (Full Names)	
ID number	
Signatory 3	
Name (Full Names)	
ID number	

A. Proposed Project Information

Proposal General Information

Name of the proposed project		
Category of the project applied for (*)		
Duration of the proposed project		
Requested (KeLCoP) funding (Kshs.)		
Group contribution (Kshs.) (actual)		
Total cost of the project (Kshs.)		
% Of CIG contribution to project cost		
Project Direct Beneficiaries		
Number of Beneficiaries (male / female)		
Number of Youth: (male / female)		
Number of the Elderly:		
Number of vulnerable people		
Others (specify):		
Total number of beneficiaries		

Objective of the organization

.....

.....

.....

Activities of the group

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

BUSINESS/PROJECT PROPOSAL

Brief description of proposed business

.....

.....

.....

Problems/needs to be addressed through the business/proposal

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Goal and Objectives of the proposed project/business

.....

.....

.....

.....

.....

Justification for the project (Give reasons why the business is required, number of people who will benefit from the project and how, job opportunities to be created through the project and how it fits into the SLCA action plan as well as other benefits)

.....

.....

.....

.....

.....

.....

Description of organization and management (existing personnel and skills, and how they will support the proposed business)–

.....

.....

.....

.....

Description of the market (target customers, estimated number per day, other players offering similar products or services in the area, source of inputs)

.....

.....

.....

.....

.....

Operations – describe how the business will run on a day-to-day basis.

.....

.....

.....

.....

.....

Monitoring and evaluation -Describe how the group will carry out monitoring and evaluation of the activities.

.....

.....

.....

.....

.....

Financing of the business - indicate how resources will be mobilized internally and externally, attach projected cash flow, income statement and balance sheet, demonstrate ability to make contribution of 10% towards the investment cost and meet non-qualifying costs. Justify why the Project cannot be financed without grant.

.....

.....

.....

.....

.....

Assumptions about the proposed business/project (things that must hold true for the business to work as planned)

.....

.....

.....

.....

Contingency measures (other options in case things do not work as planned)

.....

.....

.....

.....

.....

Sustainability plan (how will you ensure that the business/ project continues after the end of the Programme?)

.....

.....

.....

.....

i. Proposal certified by Group

Name	Position	Signature	Date
	Chairperson		
	Secretary		
	Treasurer		

Group official Stamp.....

ii. Proposal Endorsement by other Stakeholders

Level	Name	Signature and stamp	Date
Line technical Department/ Agency (Ward or Sub County)			
SLCAC			
Sub County Livestock Production officer			
County Head of department/ Agency			
PMCU			

Documents to be attached to the application

Mandatory (must be appended to application form)

- i. Certified copy of registration certificate (current)
- ii. Certified copy of constitution/by-laws signed by the relevant authority.
- iii. Bound, paged, and dated copy of the business/strategic plan
- iv. Signed and dated minutes of the previous three meetings including minutes approving the proposed business
- v. Latest Bank statement
- vi. Audited financial statements (for cooperative societies) for the previous (last) financial year
- vii. Signed list of active members (name, ID number, contact)
- viii. Attach copies of members' identity cards
- ix. Lease agreement for rented premises (where applicable)/title deed/certified allotment letter for own premises/Community land consent letter/voluntary land donation commitment.
- x. Drawings/Bill of Quantities or any documents required for implementation
- xi. Copy of business licenses/certificates/licenses from relevant regulators
- xii. Environmental compliance form
- xiii. Sketch map showing the geo-location of the group