**CPA SMALL BRANCHES**

**REGIONAL INITIATIVE FUND 2025**

**PROPOSAL FORM**

[**1.** **PROJECT PROPOSAL OVERVIEW** 1](#_Toc184829083)

[**2.** **PROJECT CONTACT DETAILS** 2](#_Toc184829084)

[**3.** **PROJECT PROPOSAL** 2](#_Toc184829085)

[**4.** **PROJECT TIMELINE** 3](#_Toc184829086)

[**5.** **PROJECT PARTNERSHIP** 3](#_Toc184829087)

[**6.** **PROJECT BUDGET** 3](#_Toc184829088)

[**7.** **REPORTING** 4](#_Toc184829089)

## **PROJECT PROPOSAL OVERVIEW**

|  |  |
| --- | --- |
| **Project Title** |  |
| **CPA Branch(es)/Region(s)** |  |
| **Budget** |  |
| **Project Start Date** |  |
| **Project End Date** |  |
| **Proposal Author** |  |
| **Proposal Author Signature** |  |
| **Application Date** |  |

## **PROJECT CONTACT DETAILS**

* 1. SMALL BRANCH CONTACT DETAILS

|  |  |
| --- | --- |
| **CPA Branch** |  |
| **Title** (Hon., Dr, Sen. Mr, Ms, etc.) |  |
| **Full name** (with parliamentary post-nominal letters) |  |
| **Position within Branch** |  |
| **Email address** |  |
| **Contact Number** |  |

* 1. PROJECT LEAD DETAILS

(if different to the Branch contact above)

|  |  |
| --- | --- |
| **CPA Branch** |  |
| **Title** (Hon., Dr, Sen. Mr, Ms, etc.) |  |
| **Full name** (with parliamentary post-nominal letters) |  |
| **Position within Branch** |  |
| **Email address:** |  |
| **Contact Number** |  |

## **PROJECT PROPOSAL**

* 1. CAPACITY CHALLENGES

|  |
| --- |
| *In a few sentences, please tell us the context of the project, where the project will be taking place, what challenges it will be addressing.*  *Please include:*   * *What challenges are faced in this context and what needs the project/activity will address* * *how were the challenges and needs identified* * *Have there been any other previous projects/work that this project will build upon* |

* 1. PROJECT SUMMARY

|  |
| --- |
| *In a few sentences, please tell us the project/activity that will be delivered.*  *Please include:*   * *who will be involved in the project/activity (direct beneficiaries, delivery modalities)* * *where the project/activity will take place* * *what activities will take place* |

* 1. PROJECT OUTCOMES

|  |
| --- |
| *In a few sentences, please list the expected outcomes of this project/activity, including mid-term or long-term results that describes an accomplishment or change in action, knowledge, skill or condition within the Branch(es) as a result of the proposed activity. Please describe how these outcomes will mitigate/resolve capacity issues.* |

* 1. PROJECT MONITORING AND EVALUTAION

|  |
| --- |
| *In a few sentences, please describe the proposed methods of monitoring and evaluation that will be used . (E.g., participant feedback forms, interviews, focus groups etc.).* |

## **PROJECT TIMELINE**

* 1. TIMELINE

|  |  |  |
| --- | --- | --- |
| **Activity** | **Deadline (either a date or number of days)** | **Notes/Description** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*Add/remove rows as required*

## **PROJECT PARTNERSHIP**

* 1. PARTNERS

|  |
| --- |
| *Please list any partnering organisation who will be assisting in the delivery or funding of your project/activity and identify their responsibilities. These could be other branches within the CPA, external partners providing resources or expertise.* |

## **PROJECT BUDGET**

* 1. PROVISIONAL BUDGET

Please note that Branches can apply for funds of up to £10,000, but not all projects will receive this amount. While larger pots are available, we encourage Branches to consider applying for smaller amounts, as the CPA is committed to supporting a range of projects of varying size. Additionally, larger bids may not necessarily be successful in securing 100% of funding applied for.

|  |  |
| --- | --- |
| **Total in Local Currency** |  |
| **Exchange Rate** |  |
| **Total in GBP** |  |

* 1. ITEMISED BUDGET

Please list of **all** expected expenses that will be claimed through Regional Initiative Fund. Failure to provide this will delay the approval of your Region’s proposal. (Add lines as necessary)

|  |  |  |
| --- | --- | --- |
| Description | Local cost (E.g., USD) | Cost in GBP |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total** |  |  |

*Please attach any additional documents (e.g., invoices, quotes, receipts etc.) that may be relevant*

## **REPORTING**

* 1. REPORTING ITEMS

Do you agree to provide the following items after the completion of the project.

|  |  |
| --- | --- |
| **Item** | **Please cross (X) to agree** |
| Short report outlining project activities and outcomes (this should include results from any project monitoring and evaluation) |  |
| Invoices and receipts for reimbursement (depending on project size this may just a proportion of the receipts) |  |
| Photos of project activities (if applicable) |  |