**GENERAL INFORMATION**

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| **1. Name (s) of practitioner (s)** |
| The proposal may be submitted by **one or two practitioners**, the names to be listed in the order agreed between them.  *For the purposes of this call, practitioners are defined as vulnerable individual artists and cultural professionals affected by the Beirut Port Blast operating or residing in Beirut and neighbourhoods mentioned in the call for proposals. They may be self-employed, sole proprietors or independent professionals with at least* ***3 years'*** *experience/good track record in cultural fields.* |
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| **2. Practitioner(s)’ profile** |
| *Tick one or more boxes that are relevant to your profile.*  **Age**   * Practitioner 1 * Practitioner 2   **Woman/Women**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Vulnerability**  (for proposals from 2 practitioners provide details per practitioner)  **Are you currently unemployed?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Do you receive income at regular intervals?**   * Weekly * Practitioner 1 yes  no * Practitioner 2 yes  no * Monthly * Practitioner 1 yes  no * Practitioner 2 yes  no * By project only * Practitioner 1 yes  no * Practitioner 2 yes  no   **Approximately how much does your household spend on food items per month?**   * Practitioner 1 * Practitioner 2 |

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| **Are any members in your household affected by a serious, long-term illness or debilitating medical condition (disability)?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Can your household afford regularly needed medical services and medicines?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Does everyone in your household have access to health insurance?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Is anyone aged over 20 in your household: illiterate/cannot read and write OR has only completed only intermediate level school or less?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Do you receive social assistance, such as cash assistance, from the government or any other national/international organization?**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Head of a single parent family**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Person suffering from disabilities**   * Practitioner 1 yes  no * Practitioner 2 yes  no   **Lived and worked in the impacted area and left after the blast**   * Practitioner 1 yes  no * Practitioner 2 yes  no |

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| **3. Practitioner(s)’ place of Residence** |
| *Only practitioners residing in Lebanon and working or residing in the neighbourhoods mentioned in the call are eligible. Please provide full address including city, street, building, phone number, etc.* |
| **Address** |

* Practitioner 1
* Practitioner 2

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| **4. Designated contact person** | |
| *Provide the name, address and other contact information of a single person responsible for all correspondence concerning the request.* | |
| Title (Ms/Mr, etc.):  Family name:  Given name:  Address:  Telephone number:  Email address:  Other relevant information: |  |

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| **5. Practitioner (s) past experiences** |
| *Tick one or more boxes to identify the sector of Cultural and Creative Industries you have been working in.*  Intangible cultural heritage  Heritage and tourism  Literature and press  Performing arts  Visual arts and crafts  Audio-visual and interactive media |

*Provide history and short description of key activities you have undertaken and your experience in the Cultural and Creative Industries in the past three years. Eligible practitioners must have carried out relevant activities for at least three years at the time of application.*

Not to exceed 500 words

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| **6. Impact by the blast** |

Explain briefly how your professional activity has been impacted by the 4 August 2020 Port of Beirut blasts (physical damages, indirect economic losses including through intellectual disruption).

Not to exceed 500 words

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| **7. Description of the proposed cultural production and its activities** |

Briefly describe what the proposed project includes as key activities.

Not fewer than 300 or more than 1000 words

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| **8. Beneficiaries** |

Explain who and how many practitioners and individuals will be involved in the development of cultural productions receiving the grants. Also explain if and which members of the local community will benefit from the roll out of cultural productions.

Not to exceed 500 words

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| **9. Duration of the Project** |

Indicate the total number of months required for the implementation of the proposed cultural production. Support can cover a maximum period of up to **six months**. *Attach a timetable using the budget and timetable template.*

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| **10. Budget** |

*Attach a detailed budget breakdown using the budget and timetable template in US dollars for the whole project.*

***Proposals from one practitioner:*** *Minimum amount: No minimum  
Maximum amount: US$ 6,000****Proposals from two practitioners:*** *Minimum amount: No minimum  
Maximum amount: US$ 8,000*

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| **Total project budget: US$** |

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| **11. Identification of Culture and Creative Domains** |
| *Tick one or more boxes to identify the Cultural and Creative Sector(s) involved in the proposed cultural production.*  Intangible cultural heritage  Heritage and tourism  Literature and press  Performing arts  Visual arts and crafts  Audio-visual and interactive media |

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| **12. Location of the project** |

*Identify the geographical area(s) in which the project will be carried out. Under this call only cultural productions rolled out in neighbourhoods affected by the Port of Beirut explosion are eligible.*

Not to exceed 100 words

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| **13. Objectives** |

*Provide a brief description of what you aim to achieve with the grant. How it will help you relaunch your work and ensure the continuity of your creative activity.*

Not fewer than 300 or more than 750 words

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| **14. Signature(s)** |

*The request should be signed by one practitioner and should include his or her name and the date of submission. (For*proposals for one practitioner*).*

*In the case of submission by two practitioners, the document should contain the name, title, and signature of both* members *of the group.*

*I confirm that all the above data provided is accurate and understand that inaccurate information might result in the disqualification of my application.*

*I understand that all the data provided in this application will be accessible to UNESCO, and to external auditors commissioned by the implementing agency or by the donors for the purpose of conducting independent auditing evaluations.*

*I agree to share my personal data (Name, ID, Address, Impact Status, and Grant Amount) with the project’s implementing agency, donors, Kafalat, and aid platforms for checking purposes, only if these platforms agree to comply with applicable data privacy guidelines.*

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*Name, title, and signature of the second practitioner (For*proposals for two practitioners*).*

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|  | Copy of identity Document (for all individuals) |
|  | Certificate of residence from Mokhtar |
|  | Proof of three years of engagement in CCI. Documents may include year of registration of sole proprietorship, accession to union, registration to the chamber of commerce, contracts or any dated informal documents such as invitations to events, activities’ reports, press releases, communication material for activities, websites and other social media content |
|  | If applicable, any document proving disability (if applicable) |
|  | If applicable, any document proving that you are head of a single parent family |
|  | Detailed Budget and Timetable for the Project |