

The **Direct Aid Program** (DAP) is a small grants program administered by the Australian High Commission in Solomon Islands. It is designed to help community groups improve their living standards.

Projects should be of a self-help nature and include community contributions. We strongly encourage applications for projects that benefit disadvantaged groups such as women, youths, those with disabilities and those from isolated communities.

Applicants may apply for projects that take up to one year to complete. Applicants should be aware that not all projects can be supported as there are limited DAP funds available and the number of requests, even for projects that fall within these guidelines, far exceed the level of funding available. The DAP Committee prefers projects under SBD300,000 but will consider high-quality projects above this threshold.

DAP cannot assist with the following: administrative costs, fundraising events, vehicles (including cars/trucks, boats, motorbikes), outboard motors, consumables (including petrol, fertilizer, chemicals), religious activities, church buildings, overseas trips, micro-credit schemes, personal commercial ventures, sporting/musical equipment, cultural activities, generators, lawn mowers, chainsaws, tools, stationery, teachers housing or goods to sell in a trade store.

The DAP scheme does not involve giving cash grants to communities. The applicants of all approved projects will be notified and asked to come to the Australian High Commission for handing over of the project. Please note applications can take up to six months to process.

DAP cannot assist individual family sanitation needs however it can assist in clinics, schools and community centre sanitation projects.

Applicants must provide the following information:

- a completed application form including a detailed project description, timeline and budget
- an endorsement letter from the relevant provincial or national government ministry
- at least two quotations for all the materials involved in the projects
- a map detailing where your proposed project is located
- any projects which involve a building must include a building diagram or plan
- a return postal address (a PO Box number is preferable) on your application form and a telephone contact number.

The community must provide a completion report to the Australian High Commission no later than two months after the project is completed. The High Commission will, as practicable, visit approved and completed DAP projects.

Completed application forms should be forwarded to:

The DAP Officer

Australian High Commission | PO Box 589, Honiara

Phone: 21561 | Fax: 23691 | Email: dap.honiara@dfat.gov.au

Project Application Summary

Name of applicant(s):	
Project name:	
Province:	Constituency:
Ward:	Community:
	vide distance from provincial capital or map)?
	plying for:
Contact person:	
Phone:	
Postal address:	
Email address:	
Have you received DAP funds before?	
If you answered yes, please provide de	etails

1) Project

 a) What is the name of this project? Please make sure the name describes what the project will do (e.g. Sikaiana water supply project)
b) Project description (what are you trying to build or create?)
c) Why does the community need this project?
d) What will your community contribute for this project? (e.g.labour, community fundraising, skills)

This form is free of charge and not for sale

e) Who will this project benefit? (estimated number of people)	
f) Is this project accessible to people with disability? (e.g. access ramp)	
g) What is the timeline for completion (how many months will it take)?	
h) What risks might stop you from making this project a success (e.g. weather; land disputes etc.)?	
i) How do you plan to manage these risks?	
j) Once the project is complete, who will take responsibility for future costs and maintenance? How will they do it (e.g. user fees, fundraising etc.)?	

2) Community responsibilities

a) Please state who will be responsible for coordinating the project, who will be responsible for finance management and any other roles:

Position	Name	Phone Contact
Project Coordinator		
(Mandatory)		
Project Treasurer/Finance		
Manager (Mandatory)		
Community Elder /		
Representative		
i. What relevant qualifications and experience do these people have? (Please mention any previous projects)		
b) Have any of the people responsible for completing the project been convicted of a crime or subject to a fraud investigation? If yes, please explain		
c) Has anyone involved in the		
funding from other donors f	tor other projects? If s	so, when and from whom?

3) Budget

a) Please provide a **detailed project budget** (this is mandatory)

Possible project items	Donor Contributions	Community Contributions	Other Partners' Contributions (if any)
Training	Must be community,		
	CDF or other		
	contribution		
Labour, salary,	Must be community,		
wages	CDF or other		
	contribution		
Materials e.g. timber, gravel, sand, roofing iron etc.			
Tools	Must be community,		
	CDF or other		
	contribution		
Consumables	Must be community,		
e.g. fuel, fertilizer,	CDF or other		
chemicals	contribution		
Transport and/or freight			
Insurance	Must be community		
	or other donor		
	contribution		
Other: please specify			
TOTAL			

b)	Have you applied for or received any funding from other donors for this project?	
	If yes, please give details.	

4) FINAL CHECKLIST

Before	e submitting the application, please make sure you have:
	Completed all sections of the form correctly and truthfully
	Enclosed a detailed budget
	Enclosed a project timeline
	Enclosed standard/approved drawing/sketch or plan of the project design (if the project includes construction) from relevant ministries. Eg, classroom building plan from the Ministry of Education, ablution block and clinic building from the Ministry of Health.
	Enclosed at least two pro-forma invoices (from two different companies) for the budget items you are asking the Australian government to fund. Note that the vendors selected must have bank accounts and businesses registered in order to process payments. Vendors/Suppliers without bank accounts will not be accepted.
	Enclosed a relevant letter of support from the relevant provincial or national government authority e.g. Ministry of Education, Ministry of Health & Medical Services
	Enclosed endorsement from the Health Ministry Senior Executive Management for all clinic building projects.
	Enclosed at least one letter of support from others associated with your community, e.g. chiefs, church and/or youth leaders
	Enclosed a letter of support from your project partner(s) (if there are any)
	Enclosed a land ownership certificate (if applicable), using template at Annex 2
	Enclosed village/community minute of meeting confirming community support/involvement for the project and referencing election of Project Committee (Coordinator, Administrator, etc)
	Enclosed a community distribution list for projects like water tanks, sanitation, boreholes etc

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Application submitted by:		
Name:	Position:	
Signature:	Date:	

Annex 1: Government Endorsement

** To be completed by Provincial/National Government representative **
Give reasons why you think this project is realistic for this community:
Give reasons and cite reference why you think this project is in line with the provincial or national development plan:
What assistance can the Provincial/National Government give to the applicant?
Endorsed by:
Name:-
Signature:-
Date:-
** Please stamp with official Provincial/National Government Seal **

Annex 2: Land Ownership Certificate Template (if needed)

This Agreement is made on,	, (date) between the
(hereina	after "The Client") and
	(hereinafter "The Land
Owner").	
1. The purpose of this agreement is for	•
commun	ity inProvince.
2. The project name is	
3. The land is available only for (purpose of land use).	
4. The land owner will do everything po	ossible to support the project to be constructed at tomary land for the project.
The client and the land owner will w project.	vork in cooperation together for the benefit of the
(For the Client)	(For the Land Owner)
Name:	Name:
Title:	Title:
Signature:	Signature: