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| AUSTRALIAN EMBASSY – DIRECT AID PROGRAM |

**For projects in Turkey, Georgia and Azerbaijan**

**APPLICATION FORM**

Project Year:

Project Number (if more than one):

**Information about program applicant**

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| **Name of applicant/organisation:** |  |
| **Contact details of organisation:****Address:****Phone no:****Fax no:****Website (if applicable):** |  |
| **Brief description of organisation:**  |  |
| **Date of establishment:** |  |
| **Name of project coordinator:****Contact details:****Phone no (office):****Phone no (mobile):****Fax no:****E-mail:** |  |
| **A short description of previous projects (if applicable):** |  |

**Project details**

|  |  |
| --- | --- |
| **Name of project:** |  |
| **Brief description of project:** |  |
| **Reason for project (objectives):** |  |
| **Target group for project:**  |  |
| **Duration of project:** |  |
| **Location of project : (city, town, village)** |  |
| **Name of the institutions/organisations with whom you plan to cooperate:** |  |
| **Please explain how the sustainability of the project will be ensured** |  |
| **Total cost of project in AUD:** |  |
| **Amount sought from the Australian Embassy in AUD:** |  |
| **Contribution of the project applicant:****(in kind or cash)** |  |

Thank you for your application.

**Contact details:**

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