

QUICK IMPACT PROJECT (QIP) APPLICATION FORM

UNMHA CIVIL AFFA	AIRS UNIT		
Name:		Title/Function:	
Email:		Telephone:	
The following sections needs to section the Submission of this form denay be required.		y the applicant. upport from UNMHA and additional in	nformation
SECTION A			
1. Title of the Project:			
2. Name of the Organis	sation:	3. Date of Application:	
4. Type of Organisation	n (Please provide lic	ense or any other supporting docu	ments):
		on (objectives, geographical area coations bank account by attaching th	
6. Name of the Applica Responsible for the Pro Implementation and M	oject	7. Function/Title:	
8. Email:		9. Mobile:	
10. Address:			
SECTION B			
11. Project Location			
Governorate:	District:	City/Town:	

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12. Project Start Date:	13. Project End Date :
·	· ·
14. Brief Description of the Project (con	text, situation, needs assessment, justification):
15. Project Purpose and Objectives (who	at do you hope to achieve with this project):
1(D	d • ()
16. Beneficiaries (who will benefit from the Estimated total number of direct	Estimated total number of indirect
beneficiaries:	beneficiaries :
Men:	Men:
Women:	Women:
Children (Boys/Girls) (0-17):	Children (Boys/Girls) (0-17):
	ries are examples and not binding) Please answer
Yes or No and provide details on number.	
Widows:	Women Headed Households :
Persons with Disabilities :	Victims of landmines :
Internally Displaced Persons:	Other:
SECTION C	

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the project objectives, the vari within the timeframe, the meas	briefly explain the various proje ious risk factors that may delay sures taken to reduce these risks lementation should not exceed a	the completion of the project; the measures taken to protect
40.74		
	mentation (briefly explain the in mentation. Please complete impl	
19. Monitoring after the impl	ementation (briefly explain the	monitoring mechanism put in
_	and sustainability of the project	•
Section D		
20. Cost Details (Please comp	lete Annex 2.)	
` .	,	
Total Cost of the Project (US \$ and YER):	Amount Requested from UNMHA (US \$ and YER):	Local contribution (US \$ and YER):
21. Have you submitted a sim	ilar request to another donor '	? If yes, please provide
details :		
22. In the event of co-financing	ng, provide details of the contri	bution of the other donors :
23. Material Requirements (li	ist material needs, including qu	nantities for each item):

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Annex 1.

Implementation Schedule (consider purchasing periods for materials and relevant activities to be undertaken during project implementation up to 6 months)

Main activities	N	Ior	nth	1	Month 2			Month 3			Month 4			4	Month 5			5	Month 6					
Main activities	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
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																								<u> </u>
																								-
N. C. 1																								
Monitoring of the																								
Project																								<u> </u>
Assessment and final																								
inspection																								
* The number of column	ıns ir	ıdio	cate	es t	he	wee	eks																	



Annex 2. Detailed Budget in USD and YER

1. A	cquisition of equipi	ment (<i>insert</i>	aaamonai i		<i>y)</i>	
No.	Description	Quantity	Unit Price	Total Cost	Local Contribution	Amount Requested
1.					Contribution	requesteu
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
2. O	ther costs					
2. O No.	ther costs Description	Quantity	Unit Price	Total Cost	Local Contribution	Amount Requested
		Quantity	Unit Price	Total Cost	Local Contribution	Amount Requested
No.		Quantity	Unit Price	Total Cost		
No. 1.		Quantity	Unit Price	Total Cost		
No. 1. 2.		Quantity	Unit Price	Total Cost		
No. 1. 2. 3.		Quantity	Unit Price	Total Cost		
No. 1. 2. 3. 4. 5.	Description	Quantity	Unit Price	Total Cost		
No. 1. 2. 3. 4. 5.		Quantity	Unit Price	Total Cost		
No. 1. 2. 3. 4. 5. 6. 3. G	Description	Quantity	Unit Price	Total Cost		
1. 2. 3. 4. 5. 6. Sub	Description rand Total	Quantity	Unit Price	Total Cost		