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| **Partners for Youth-Led Youth Economic Empowerment Activity**  **for USAID Ma3an Project**  **Expression of Interest**  **Application Form** | |
| **Name of the Organization** (full name):  **Address:**  **Telephone:**  **E-mail:**  **Website (if available):**  **UEI Number (if available):** | **Contact Person, Title, & Email:** |
| **Person Authorized to Sign Contracts in the Organization & Title:** |
| **Geographic Locations**  Ma3an’s youth-led Youth Economic Empowerment (YEE) collaborative action planning process will be implemented across the 15 Ma3an governorates as outlined in the Expression of interest document. Each grantee will be implementing the YEE process activities in one zone (each zone includes 2-4 governorates). Please note, to ensure coverage of all 15 Ma3an governorates the final governorates for each grantee will be defined jointly by Ma3an and successful applicants.   1. Specify in which Zone and governorates your organization plans to operate (Each of the 5 selected partners will support Ma3an by directly implementing activities in one of the 5 zones).   ***The table below lists the zones, the governorates and communities served by Ma3an. Please make sure that you are working in at least these communities in each of the governorates in your chosen zone and you may propose other communities.***   |  |  |  | | --- | --- | --- | | **Zones** | **Governorates** | **Ma3an Communities** | | **Zone 1** | **El Kef** | Kef City | | **Jendouba** | Fernana / Ghardimaou | | **Siliana** | Laaroussa / Rouhia | | **Zone 2** | **Gafsa** | Mdhilla / Ksar / Gafsa South | | **Kasserine** | Kasserine (Kasserine N., Ezzouhour and Ennour) / Feriana / Thala | | **Sidi Bouzid** | Sidi Bouzid Center / Souk Jedid | | **Zone 3** | **Kairouan** | Nasrallah / Kairouan North | | **Zaghouan** | Saouaf / Nadhour | | **Sousse** | Hay Riadh / Sidi Abdelhamid | | **Zone 4** | **Medenine** | Medenine North / Beni Khedache / Sidi Makhlouf | | **Tataouine** | Tataouine North / Tataouine South / Bir Lahmer | | **Zone 5** | **Ariana** | Ettadhamen | | **Tunis** | Hrairia / Sijoumi/ Kram | | **Mannouba** | Douar Hicher | | **Ben Arous** | Hammam Lif / Mohamedia / Fouchena |   Preferred zone (governorates): “Please indicate zone number and governorates”    2. Complete the table below for each governorate from the list above where your organization currently has, or previously had, operations and/or programming. To be eligible, applicants should be currently present in and/or demonstrate their ability to operate and launch activities in one zone and each of its governorates by May 2023.  |  |  | | --- | --- | | **Zone #:** |  | | **Governorate:** |  | | Is your organization physically present in the governorate? If yes, please describe your presence (office, how long has it been established, how many staff/volunteers are linked to that office, etc.). If you are not physically present in this governorate, please describe how you plan to launch and implement activities in this governorate. | | |  | | | What activities have you previously or are you currently implementing in this governorate?  As applicable, mention specific communities from the list above where these activities took place.  Include information on stakeholders – civil society, youth, government, etc. – you engaged in these activities. | | |  | |  |  |  | | --- | --- | | **Zone #:** |  | | **Governorate:** |  | | Is your organization physically present in the governorate? If yes, please describe your presence (office, how long has it been established, how many staff/volunteers are linked to that office, etc.). If you are not physically present in this governorate, please describe how you plan to launch and implement activities in this governorate. | | |  | | | What activities have you previously or are you currently implementing in this governorate?  As applicable, mention specific communities from the list above where these activities took place.  Include information on stakeholders – civil society, youth, government, etc. – you engaged in these activities. | | |  | |  |  |  | | --- | --- | | **Zone #:** |  | | **Governorate:** |  | | Is your organization physically present in the governorate? 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| **Part 1. Description of Applicant's Qualifications:**  Briefly describe your organization and your technical and organizational experience. Respond to each of the following questions and ***use as much space as you need* to respond adequately.**   1. What is your organization’s vision? 2. What is your organization’s mission and what type of activities does your organization implement to achieve it? 3. How do you see Ma3an’s objectives relating to your organization’s mission?   What is your organization's experience, capacity, and interest in working on youth economic empowerment and collaborative solution design programming in general? If your organization currently lacks this experience and capacity, please explain why your organization would be interested in implementing the activities for the YEE collaborative process.  Does your organization have experience in skills building, economic empowerment, collaborative processes, or locally-led solution design programming? Please describe this experience.  Does your organization have experience managing donor-funded projects? If you have not previously been involved in managing donor-funded projects, discuss how your organization can ensure that it has the capacity needed to manage Ma3an’s activities. | |
| **Name, Title, and Signature of the Person that is authorized to sign agreements:**  Being the person authorized to sign contractual agreements on behalf of the organization, I certify that the information in this form is complete, truthful, and accurate.  **Name and Surname:**  **Position:**  **Organization:**  **Signature:**    **Date:** | |