**CONCEPT NOTE**

Please complete this form and send it along with your organisation’s most recent annual report and financial statement to [info@octavafoundation.com](mailto:info@octavafoundation.com). Please limit the completed form to a maximum of 2 pages front and back. If you are considering to propose more than 1 project, please complete another concept note.

**Details of Organisation**

|  |  |
| --- | --- |
| Name of Organisation: |  |
| Type of Organisation: | *E.g. Charity with IPC status, Social enterprise, Voluntary Group, Ground-up Initiatives* |
| Organisation’s Mission: |  |
| Years of Operations: |  |
| Location of Operations: | *Only projects operating in Singapore will be considered. Please list which area(s) in Singapore you work in* |
| Accomplishments/Awards: | *If applicable* |
| Target Beneficiaries: |  |
| Main Activities/Programs: |  |
| Attach Most Recent Annual Report and Financial Information: | *Please give us the link to the document(s) or send them as an email attachment with this form* |
| Website Address: |  |
| Key Contact Person(s): | *Please list the name(s), designation(s) and email address(es)* |
| Date of Application: | *The date you sent the concept note to Octava Foundation* |

**Project Details**

|  |  |
| --- | --- |
| Name of Project: | *If different from organisation’s name* |
| Problem Statement: | *Please describe the social need(s) or issue(s) that your project seeks to solves* |
| Overview of Project: | *Please describe your project, its key activities, where its delivered, for how long you’ve been running the project etc. Please also include the past results you have observed in terms of specific outcomes and impact on your target group* |
| Solution Proposed through Project: | *Please describe how your project addresses your problem statement. You can use this section to detail your theory of change or logic model and share any proof or evidence for this approach* |
| Evaluation/Impact: | *Feel free to send through any evaluation/impact report for the project that you might have done* |
| Target Group for the Project: |  |
| Number of Clients Served: |  |
| Key Project Objectives and Intended Outcomes: | *Use this section to detail specific goals of the project e.g. inputs, outputs, outcomes, impact* |
| Elements of Differentiation: | *How is your project unique/different in serving your target group/resolving your problem statement?* |
| Project Duration: | *Expected timeline* |
| Total Proposed Budget of Project: |  |
| Grant Funding Requested: |  |
| Past and Current Sources of Funding for this Project: | *For new projects, please provide your source(s) of funding for the project. For ongoing projects, please provide how the project has been funded to date* |