



# Asylum, Migration and Integration Fund (AMIF) Application for Funding

## ABM3 - Integration of TCNs

### Contact Information

Name of Organisation	
Full Address	
Main contact and position	
Email address	
Telephone number	



Ensure all dates and amounts entered in separate documents match

### Project Information

Project Title	
Proposed Project Start Date	dd/month/yyyy
Proposed Project End Date	dd/month/yyyy
AMIF Funding amount	£
Match Funding amount	£
Total Cost of project	£ (this figure must be the total of the previous two fields)
Where did you hear about the Call?	

## Other European Funds

<b>If you are in receipt of European Commission funds, please state fund and purpose</b>	
<b>If you intend to apply for any other EC funds, please state fund and purpose</b>	

## **Part 1: Relevance**

In this section, you will be expected to demonstrate how your proposal relates to the requirements of the AMIF Fund. We will expect you to outline what you intend to use the AMIF grant for and whom the target group (also referred to as final beneficiaries) will be.

Please ensure your answers address the question in a concise manner.

Failure to adhere to the word counts stated may adversely affect your application.

Don't forget!



1. What is the aim of your project? (max 900 characters including special characters and spaces)

2. Who are your target group and how have you established their eligibility? (max 100 words)

3. Please state which option for claiming indirect costs you are applying for:

- 15% of direct staff costs ☐
- 40% of direct staff costs ☐

## **Part 2: Added Value**

In this section, you will be expected to demonstrate why your project is needed by your chosen target group and in your chosen locations. You will need to demonstrate an understanding of the existing service provision in the area(s), including its limitations, and describe the value your project will bring.



If a large number of applications are received an initial sift will be completed to consider the added value that this project will bring to existing services

4. In which geographical area(s) will your project operate? (Please specify town and county) (max 50 words)

- 5. What research are you relying on to evidence the existence of your target group exists in the geographical areas listed. Please provide a brief synopsis of the findings you are relying on. (max 250 words)**

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- 6. Please describe the existing services being provided to your target group in your chosen area(s) of operation, which organisations are offering these services and how your project fills any gap in services. (max 250 words)**

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7. How will you ensure that the target group is not accessing the services that you are offering with another AMIF funded project? (max 250 words)

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## **Part 3: Efficiency**

In this section, you will be required to demonstrate that your project will deliver an achievable and realistic output, whilst maintaining value for money.

This aspect of the application will be assessed using your responses to the questions below, the total core output table overleaf and the Budget Estimate Toolkit which is separate to this form. Please ensure you have completed both forms with the relevant information. Failure to do so may adversely affect the outcome of your application.

You must enter a “total core output”. This is the overall objective that you intend to deliver with AMIF Funding.

The quarterly activities you list should clearly demonstrate how you will meet each quarterly target.

You will be expected to deliver what you describe within each quarterly target field. Failure to do so may result in termination of funding.



**Example:**

Total Core Output		
e.g 260 TCNs from Anonymous Town, undertake an employment programme by 31 December 2022		
Quarter	Quarterly Target	Quarterly Activities
1	e.g. 40 TCNs begin a 16 week employment programme	Initial assessments for TCNs 4 x 16 week employment classes to include cv writing, mock interviews and self employment workshops

Now please turn over to enter the information about your total core output for this project.

<b>Total Core Output</b> <i>Using the SMART principles (Specific, Measurable, Achievable, Realistic and Time-bound), please outline the total core output for the project. Quarterly outputs must add up to at least the total core output. Each beneficiary can only be counted <b>once</b> regardless of the number of activities undertaken. (max 250 words)</i>		
Quarter	Quarterly SMART Output	Quarterly Activities
1		
2		
3		
4		
5		
6		
7		
8		

9		
10		

**8. What documentary evidence will you provide to demonstrate these activities have taken place? Please note that tick registers are not sufficient. All activities undertaken must be signed off by the beneficiary. It is expected that each beneficiary will have a personal integration plan. (max 250 words)**

## **Part 4: Effectiveness**

In this section, you will be required to demonstrate your ability to run the project.

### **Staffing and resources**

9. What experience does your organisation and/or project staff have of working on projects/services similar to those in this application? (max 250 words)

**10. Please outline the staffing required for this project. If staff are not currently in post to work on this project, please state how you will ensure the roles are filled and when this will be completed. Please ensure you include sufficient administrative roles to complete monitoring, audit and evaluation on the project which can be onerous (max 250 words)**



**You must provide job descriptions for all of the positions listed in question 12 and an organisation chart showing all of the individuals involved in project delivery**

## Partners

Partners are organisations and institutions that, in conjunction with the lead applicant that submitted the application, participate in designing and implementing project activities, share the relevant tasks and finance. Both the lead applicant and the partners share contractual and financial responsibility for the proper and timely implementation of the project. The costs partners incur are eligible in the same way as those incurred by the lead applicant.

The eligibility rules applicable to the lead applicant apply exactly the same for all partners involved in the project. All partners are bound by the same rules. We would expect there to be a 'partnership agreement' in place between all partners in a project setting out the roles and responsibilities of each.

However, the lead applicant remains the main point of contact for the UKRA and is responsible for the operational and financial reporting and for providing the necessary information and evidence for the project.

11. Please list the partners that will be involved in this project. If none, please continue to question 15. (max 250 words)

**12. How long you have had a working relationship with the aforementioned partner(s)? (250 words)**

**13. What activities will you deliver and what activities will be delivered by your partners? (max 250 words)**

**14. How will you monitor and obtain information securely, from each of your partner organisations? (max 250 words)**



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## Subcontracting

Please refer to the application guidance for more information on EU Procurement rules before completing this section.

**All projects**, including those operating with the Simplified Cost Option, must ensure that their procurement procedures comply with the rules outlined by the European Commission.

Contracts which do not comply with these rules will be ineligible for AMIF funding.



15. Will subcontractors be required for this project? Yes/No  
If no, please continue to question 18.

16. Which element(s) of the project do you intend to subcontract and why?  
Please note that project management cannot be subcontracted. (max 250 words)

**17. Have you already procured the subcontract(s) for this project? Yes/No**  
If no, please continue to question 18.

If yes, please refer to the procurement information outlined in the application guidance, then explain how your procurement process complied with these guidelines (max 250 words)

## **Match-funding**

**18. Please say who is providing the match funding for this project and outline your contingency plan for the loss of match-funding (max 250 words)**

## Data Protection and Information Management

Projects and organisations which do not comply with the requirements of the Data Protection Act (DPA) 2018 are ineligible to receive AMIF funding. This applies to all organisations that you share data with and collect data from.

19. Do you, your partners and subcontractors agree to comply with the requirements of the DPA 2018 and ensure organisations that you work with on the project agree to comply with the requirements?

- Yes ☐
- No ☐

20. Please outline how your project and organisation will comply with the DPA 2018 and how you will ensure organisations that you work with on the project agree to comply with the requirements? (250 words)



## **Part 5: Sustainability**

**Project sustainability is measured by how well the project's actions continue to have a positive benefit on its participants and their community in which it operated *after* the project has concluded.**

**21. Please outline how your project actions will continue to benefit the final beneficiaries (project participants)/community after its closure. (max 250 words)**

## **Part 6: Checklist**

Incomplete applications will not be considered; applicants will receive notification that their applications have been unsuccessful on these grounds.

Applications will not be reviewed prior to the closing date of the Call, irrespective of when they are submitted. You will not have the opportunity to submit any documents once the Call has closed.

Please therefore ensure that you are ready to submit a complete application.

Have you:

1	Completed all parts of this application form
2	Completed all sections and fields of the Budget Estimate Toolkit
3	Completed the match-funding template on letterheaded paper with the signature of a Finance Director/Manager from that organisation
4	Provided the last 2 years of accounts from your organisation and partner organisations
5	Completed the partnership declaration template(s) if applicable
6	Completed the Organisation Information Form for lead and partner organisations
7	Ensured your responses do not exceed the word counts

## **Part 7: Declaration**

**This declaration must be signed by the Finance Director/Manager and Legal Signatory in your organisation.**

We, the undersigned, apply for a grant under the European Asylum, Migration and Integration Fund (AMIF) in respect of the project described in this application.

We declare that all the information provided within this application is true and complete to the best of my knowledge and belief and we understand that any funding paid in respect of the project may be withdrawn if any of the information provided in this application is untrue. We acknowledge that any funds awarded must be used for the purpose(s) stated.

**Finance Director/Manager Signature:**

**Name:**

**Date:**

**Legal Signatory Signature:**

**Name:**

**Date:**

## **Part 8: Match-Funding Template**

**Using letter-headed paper, please submit the template outlined below with this application as evidence of Match Funding. Please ensure you have entered the relevant details below. If you are receiving match funding from other sources please list all organisations and the amount they have committed.**

AMIF UK Responsible Authority  
7<sup>th</sup> Floor Southern House  
Wellesley Grove  
Croydon  
CR0 1XG

(Date)

(Title of the Project)

I confirm that (organisation names) agrees to provide match-funding for the above named AMIF project broken down as follows:

- (List organisations) - Up to GBP £(XXXXXXXX.XX)

for the period (dd/month/yyyy) to (dd/month/yyyy)

equal to 25% of total overall project costs as set out in the application for AMIF funding.

I confirm that this match funding does not come from any other EU/EC source.

Yours sincerely

Signed (Legal Signatory)

Date: (dd/month/yyyy)

## **Part 9: Partnership Declaration Template**

Using letter-headed paper, each partner in the project must complete this declaration. Please ensure you have entered the relevant details below. This must be signed by the person with legal responsibility to make a partnership agreement.

AMIF UK Responsible Authority  
7<sup>th</sup> Floor Southern House  
Wellesley Grove  
Croydon  
CR0 1XG

(Date)

(Title of the Project)

(Name of the organisation proposing this project (the lead partner))

(Full Legal Name of associate partner organisation)

(Address of associate partner organisation)

(Telephone number of associate partner organisation)

(Role, contribution, activities of the partner organisation in the project)  
(max 250 words)

(Name of Person responsible for participation in project)

(Function in the organisation)

I, the undersigned, declare that I have read the entire project proposal contained within this application, discussed it with the co-ordinator and given my agreement to it. On behalf of the associate partner organisation, I undertake to perform the role allocated and according to the work plan and timetable of the project.

Signature: (Authorised signatory of the partner organisation)

Title:

Name and Surname:

Position in associate partner organisation:

Date: dd/month/yyyy