**ANNEX 1a: SUBSIDY APPLICATION FOR ASSOCIATIONS LAUNCHING PROJECTS IN THE FIELD OF INTEGRATION AND INTERCULTURAL LIVING TOGETHER**

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| **General information about the association** |

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| Name of the association: | ---------------------------------------------------------------------------------------------------------------- |

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| Legal status : | ------------------------------------- | Matricule RCS: | ------------------------------- |

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| Address : | ------------------------------------- | Postcode: | ------------- | Town: | ------------- |

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| Phone number: | ------------------------------------- | Website: | ---------------------------------------------- |

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| Main field of action of the association: | ------------------------------------------------------------------------------------- |

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| Association under agreement with another ministry? | |  | Yes |  | No |
| If yes, which one(s): | ---------------------------------------------------------------------------------------------------------------- | | | | |

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| **Bank details** |

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| Account holder : | ---------------------------------------------------------------------------------------------------------------- |

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| BIC Code : | -------------------- | IBAN code : | ----------------------------------------------------------------- |

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| **Contact person(s)** |

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| *President/Person in charge of the association:* | |
| Surname, First Name: | ------------------------------------------------------------------------------------------------------------------------- |

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| Phone number: | ------------------------------------------ | Email: | ----------------------------------------------------------- |

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| Address: | ------------------------------------------ | Postcode: | ------------- | Town: | ------------------------ |

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| *Project officer/contact person (to be completed if different from the President/Person in charge):* | | | |
| Surname, First Name: | ----------------------------------------------------------- | Role: | ------------------------------------------ |

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| Phone number: | ------------------------------------------ | Email: | ----------------------------------------------------------- |

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| Address: | ------------------------------------------ | Postcode: | ------------- | Town: | ------------------------ |

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| **Project description** |

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| Title of the project: | ----------------------------------------------------------------------------------------------------------------- |

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| Date of the project: | ------------------------------- |

Or

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| --- | --- | --- | --- | --- |
| Implementation period: | From | ------------------------------- | to | ------------------------------- |

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| --- | --- |
| Target audience(s): | ----------------------------------------------------------------------------------------------------------------- |

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| Location(s): | ----------------------------------------------------------------------------------------------------------------- |

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| Is this a new project? |  | Yes |  | No |

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| Is this a new edition of an existing project? | |  |  |  |  | | --- | --- | --- | --- | |  | Yes |  | No | | Edition n° | N° | Since : | Year |

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| Project description (maximum 15 lines): |
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| **Relevance of the project** |
| What are the needs/requirements identified at the basis of the project? |
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| How does the project promote integration in Luxembourg? |
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| Project objectives and expected results: |
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| How does the project complement other activities financed under national (PAN, conventions, etc.) or municipal programmes? |
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| **Project feasibility and partnership(s)** |
| Detailed description of the project implementation steps (implementation calendar) |
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| Name(s) and role(s) of partner(s) (if applicable) : |
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| **Project evaluation** |
| How many people does the project aim to reach? |
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| How will the project involve both Luxembourgish and non-Luxembourgish audiences? |
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| What means of communication will be in place? |
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| What monitoring system will be adopted? How will the impact of the project be assessed? How will the satisfaction of the target audience(s) be assessed? What indicators will be put in place to assess the project? |
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| **Additional information: please indicate any additional information that you feel is relevant to justify your application (innovative element of the project, needs, etc.)** |
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| **Provisional budget** |

Each applicant is required to complete the provisional budget template in detail, specifying the purpose of each expense. If available, supporting documents (quotes, etc.) should be attached.

***N.B.*** Please note that the Ministry of Family Affairs, Integration and the Greater Region only finances up to 75% of the total costs of a project (with a legal threshold of €100.000 per project) in the context of a subsidy. However, the terms and conditions document lays out the total amount available for the entirety of subsidies for the current calendar year (N).

The following expenses, incurred during the current calendar year (N), are considered eligible:

* expenses incurred and paid for during the duration of the project;
* expenses directly related to the project and necessary to carry out the project activities;
* expenses that are reasonable and respecting the principles of sound financial management (optimization of resources and cost-effectiveness ratio according to the number of people involved in the project);
* counted, identifiable, controllable and duly documented expenses from the start of the project onwards.

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| **(A) Expenditure** | | **Detail(s)** | **Amount** |
| **1** | Personnel costs | ------------------------------------------------------ | ------------------------ |
| **2** | Travel and subsistence costs | ------------------------------------------------------ | ------------------------ |
| **3** | Equipment costs | ------------------------------------------------------ | ------------------------ |
| **4** | Real estate rental costs | ------------------------------------------------------ | ------------------------ |
| **5** | Consumables, supplies and general services | ------------------------------------------------------ | ------------------------ |
| **6** | Experts and subcontractors | ------------------------------------------------------ | ------------------------ |
| **7** | Administrative costs | ------------------------------------------------------ | ------------------------ |
| **8** | Other costs (please specify) | ------------------------------------------------------ | ------------------------ |
| **Total cost of the project (100%)** | | ------------------------------------------------------ | ------------------------ |

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| *Any revenue received during the project’s implementation (own resources, other subsidies, sponsorship, financial support, etc.) must be indicated in the financial statement (Appendix 3) to be submitted at the end of the project. The receipts will then be taken into account for the calculation of the project balance. Thus, the amount of the 2nd payment may be reassessed accordingly, however without exceeding the maximum amount initially granted to the project.* |

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| Has a request for a subsidy been made to another Ministry? | |  |  |  |  | | --- | --- | --- | --- | |  | Yes |  | No | |

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| If yes, which Ministry(ies) and for what amount(s) ?: | -------------------------------------------------------------------------------------- |

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| List the projects carried out in recent years for which you have received a subsidy from the Ministry of Family Affairs, Integration and the Greater Region (if applicable): | | |
| **Project name** | **Year** | **Subsidy awarded?** |
| -------------------------------------------------------------------------------------- | ---------------- | |  |  |  |  | | --- | --- | --- | --- | |  | Yes |  | No | |
| -------------------------------------------------------------------------------------- | ---------------- | |  |  |  |  | | --- | --- | --- | --- | |  | Yes |  | No | |
| -------------------------------------------------------------------------------------- | ---------------- | |  |  |  |  | | --- | --- | --- | --- | |  | Yes |  | No | |

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| **Required documents** |

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| **Please certify the following required documents have been submitted by ticking the appropriate boxes:** | |
|  | Duly completed and signed application form |
|  | Certified and signed articles of incorporation by the president of the association and a list of the members of the board of directors |
|  | Activity report and financial statement for the past year (*signed by the president or treasurer of the association*) - optional |
|  | Bank statement/details (RIB) |
|  | Programme of planned integration-related activities for the current year - optional |
|  | Any other document deemed useful to support your application |

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| **Terms and conditions to be respected** |

* Submit a complete application in accordance with the deadlines set out in the terms and conditions of the grant.
* Mention "With the support of the Ministry of Family Affairs, Integration and the Greater Region" on all information and communication documents intended for the public, as well as the website, while also including the logo of the Department of Integration.
* Inform the Ministry of any major changes related to the project.
* Provide the Ministry with any information/document deemed necessary for the processing and monitoring of the project.
* In the event of double public funding, the project holder must return all sums unduly received to the Luxembourg government. The same applies if the declarations prove to be inaccurate or incomplete, or if the use of the financial assistance does not correspond to the purpose for which it was granted, or if controlling bodies or services are hindered in the performance of their duties by the beneficiaries.
* After obtaining a subsidy, the association commits to submit the following documents to the Ministry of Family Affairs, Integration and the Greater Region, before the 31st of January N+1:
* Financial statement - Annex 3 (invoices with proof of payment)
* Project implementation report - Annex 4
* Promotional material and/or documentation related to the project

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| **Signature** |

**The signature below certifies the compliance of the information provided.**

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| **Location:** | -------------------------------------------- | **Signature:** |  |
|  |  |  |
| **Date:** | -------------------------------------------- |  |