

**GRANTS APPLICATION FORM**

**Urgent intervention**

Euro-Mediterranean Foundation

of Support to Human Rights Defenders (EMHRF)

|  |
| --- |
| Please send the duly completed application form by e-mail to the EMHRF Secretariat: **grants@emhrf.org** |

*Please click in the grey boxes below to fill in the form****.***

***\* Mandatory nature of the data requested.*** *Embedded in its core mission, the EMHRF firmly values and respects the right to privacy and is committed to processing relevant personal data in accordance with the EU General Data Protection Regulation (GDPR). In the absence of communication of mandatory personal data, we will not be able to respond to your request.*

1. **Background information about the applicant**

|  |  |
| --- | --- |
| Designation of the applicant\* | [ ]  Individual defender [ ]  NGO [ ]  OtherComments, if any:       |
| Country of origin[[1]](#footnote-2)\* |       |
| Country of residence, if different from country of origin\* |       |
| Contact details\* | Name:      Address:      E-mail address:      Phone number:      Skype ID:       |

1. **Background information about the context**

|  |  |
| --- | --- |
| Description of the context for which emergency assistance is requested and of the urgent nature of the situation. \*Please include a detailed description of the applicant’s activities in defense of human rights. If available, include links to relevant websites. \* |            |
| Description of the threats against the defender(s) or the NGO on the pursuit of his/her/their/its activities, if any\* |       |
| Brief description of the security management practices (ensuring the security of employees, partners and activities) used by the applicant, if any.  |       |

1. **Urgent request**

|  |  |
| --- | --- |
| Amount of funding requested (indicate currency) \* |       *Note:* *may not exceed € 5,000.* |
| Description of the needs to be covered in emergency\*  | *Please submit a budget as attachment to this application and provide any documentation to substantiate the expenses budgeted, if available.* |
| Duration of the requested support\* |      *Note: in general, the maximum duration of support is 6 months.* |
| Brief description of the expected outcomes of the urgent intervention |  |
| Brief analysis of capacity development needs that, beyond financial support, could help maintain the safety/wellbeing and activity of the applicant |  |
| Please describe how you plan to cover your living costs/secure the continuation of your human rights work after the end of the requested grant. |  |
| Have you submitted your funding application to other possible donors? \* | [ ]  Yes [ ]  NoIf no, please explain why:       If yes, indicate:* name(s) of donor(s):
* amount requested:
 |

1. **References**

|  |  |
| --- | --- |
| Names of human rights organizations acting as partners in your activities\* |  |
| References or partners who can be contacted to support or endorse your request. \* | *Reference 1:* Name:      Organisation:      E-mail address :      Phone number:      Skype ID:      - - - - - *Reference 2:* Name:      Organisation:      E-mail address:      Phone number:      Skype ID:       |

*The EMHRF has a no-tolerance policy on several types of misconduct (including corruption, mismanagement, nepotism, discrimination, racism, violence, and harassment). Applicants can use the generic email address* *complaint@emhrf.org* *to report any misconduct or abuse by the staff in relation with the assessment of their applications. Please provide sufficient details to substantiate your complaint.*

1. Please note that the EMHRF has a limited geographical mandate and can only support human rights defenders, groups and organisations from Morocco, Algeria, Tunisia, Libya, Egypt, Lebanon, Jordan, Syria, Palestine and Israel. [↑](#footnote-ref-2)