2020/21 CALL FOR APPLICATIONS
FOR AGENT / REPRESENTATIVE / CONDUIT
APPLYING ON BEHALF OF ORGANISATION / COMMUNITY

Please note:

- An agent / representative / conduit may only apply to assist one organisation / community in this call.

- If an agent/ representative/ conduit wants to apply for its own programmes and operations, it must submit a separate, independent application including all mandatory documents.

- This form must be completed by both the agent / representative / conduit and the assisted organisation / community.

- The assisted organisation must have been in existence for a period of less than six months;
  or
  There must be a clear community need but no recognised legal entity to address the need.

- One business plan, budget and motivation (Annexure A) must be attached.

- One fully completed form (Annexure B) must be submitted.

- Agent / representative / conduit must submit all mandatory documents as per the guidelines and prescribed in the Act and Regulations.

- Agent / representative/ conduit must submit a skills transfer / mentorship plan using the template provided. The plan must be attached to the business plan.

- Agent / representative / conduit must be a Non-Profit Organisation, Non-Profit Company (formerly Section-21 Company), or Public Benefit Trust.
1. Agent/representative/conduit:
   Name: ________________________________________________________________
   Physical address: _______________________________________________________
   ____________________________________________________________________

2. Assisted organisation/community:
   Name: ________________________________________________________________
   Physical address: _______________________________________________________
   ____________________________________________________________________

3. Reasons why the agent/representative/conduit is assisting this organisation/community:
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

4. What qualifies your organisation to assist the organisation/community?
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

5. What skills/capacity does the assisted organisation/community need to be developed? (Capacity building/skills transfer plan to be attached to this form)
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

6. How will progress and implementation of the project be monitored and measured?
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
7. In the case of a community, how will registration as a legal entity be facilitated?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

8. Is the agent / representative/ conduit charging a fee for skills transfer and capacity building? ______

If yes, please specify the amount and items that will be charged for. Please note that this should not exceed 5% of the total grant application per assisted organisation/ community.
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

We hereby commit to working together to achieve the objectives of the project. We further commit to inform the National Lotteries Commission if there is any breach of this signed agreement.

Name of representative of Agent/ representative/ conduit

Name of representative of assisted organisation/ community

Signature: _________________________   Signature: _________________________

SA Identity Number: _________________________   SA Identity Number: _________________________

Date: _________________________   Date: _________________________