

SCHEDULE 3

(Regulation 10(1))

APPLICATION FORM FOR ACCREDITATION



APPLICATION FORM FOR PROJECT FUNDING UNDER THE TONGA CLIMATE CHANGE FUND ACT 2021 MINISTRY RESPONSIBLE FOR CLIMATE CHANGE

*Complete this form if you wish to apply for project funding under section 34 of the
Tonga Climate Change Fund Act 2021*

Please request a copy and read the TCCF Instructions before completing this Application Form. This Form must be completed in English or Tongan. All questions **MUST BE ANSWERED** or the proposal will not be considered for funding. If the space provided is not enough, please attach a separate piece of paper for each question. Supporting materials such as letters, photographs or diagrams may be attached.

IF YOU HAVE ANY QUESTIONS ABOUT THE FORM, PLEASE CONTACT:

The Secretariat

Tonga Climate Change Fund

Department of Climate Change

Ministry of Energy, Information, Disaster Management, Environment, Communication and Climate Change
(MEIDECCC)

Telephone:

Fax:

Email:

**THE SECRETARIAT WILL ACKNOWLEDGE THE RECEIPT OF THE APPLICATION AND PROVIDE A PROJECT APPLICATION
NUMBER**

PART A – ENTITY INFORMATION

1. CONTACT DETAILS	<i>Name of contact person:</i> <i>Position:</i> <i>Address:</i> <i>Telephone number:</i> <i>Email:</i>	
2. ENTITY TYPE	Official name of entity applying for accreditation	
	Please indicate the category which applies to the entity. Please provide evidence in support	<input type="checkbox"/> Government Ministry <input type="checkbox"/> Registered company <input type="checkbox"/> Registered NGO <input type="checkbox"/> Charitable Organization <input type="checkbox"/> Recognized Community Group
	Who manages or is responsible for decisionmaking in your entity?	<input type="checkbox"/> Minister <input type="checkbox"/> Director / Chief Executive Officer <input type="checkbox"/> Board <input type="checkbox"/> District council / Committee <input type="checkbox"/> Village council / Committee <input type="checkbox"/> Other Please describe:
3. PROJECT INTEREST	Please provide a brief description of the types of projects that your entity will be interested in implementing, if the entity is accredited	

4. LEVEL OF COVERAGE	Please describe the level at which your entity operates and the likely beneficiaries for your entity's projects	<input type="checkbox"/> Village / District level <input type="checkbox"/> Island level <input type="checkbox"/> National level
5. PERSONNEL	How many staff are employed by your entity? What types of technical skills do they have?	
6. BUDGET	Does your entity receive a regular/recurrent budget? Please describe the main source(s) of income?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Main source(s) of income:
7. FIDUCIARY MANAGEMENT	Who manages the finances/funding in your entity? Who prepares financial statements? Are the financial statements audited? What is the name of your auditor?	

PART B – TRAINING OF PERSONNEL					
Should your application be successful, please nominate 3-5 members (at least one of whom shall be a woman), to receive specific training on aspects of the Tonga Climate Change Fund Act 2021 and who will liaise closely with the Secretariat on behalf of your entity					
	CEO / Chair	Member 1	Member 2	Member 3 (optional)	Member 4 (optional)
Name:					
Position in entity:					
Full address:					
Email:					
Telephone:					

PART C – NON-GOVERNMENT ORGANISATIONS AND COMMUNITY GROUPS

This Part should be completed by Non-Government entities only. Please provide references from the community for your entity. Attach each reference to this application form.

BRIEF DESCRIPTION OF YOUR NGO OR COMMUNITY GROUP	When was your entity or group formed?	
	What is the purpose and activates of your entity or group?	
	Do you have a community development plan? If so, please describe what it is and provide a copy	<input type="checkbox"/> Yes <input type="checkbox"/> No Please describe:
	Has your entity adopted one or more policies related to climate change, disaster risk reduction or national resilience? If so, please describe what it is and provide a copy	<input type="checkbox"/> Yes <input type="checkbox"/> No Please describe:
	First Referee	Second Referee
Name:		
organization:		
Position:		
Address (full address):		
Email:		

Telephone:		
How is this person known to you/your organization?		

PART D – SIGNATURE

Should this application be successful I,, the AUTHORISED REPRESENTATIVE OF THE APPLICANT ENTITY, hereby confirm that the information provided in this application are true and correct to my knowledge and belief.

I also undertake to:

✓ Comply fully with requirements of the Tonga Climate Change Fund Act 2021, regulations made under the Act and the Operational Manual for the Fund

✓ Liaise with the Secretariat from time to time, as required

✓ Ensure that members of the entity are available for training provided by the Fund, as applicable

Full name:

Position in the Organisation.....

Date:

SUBMISSION CHECKLIST

Before submitting your application, please check and confirm the following supporting documents have been provided:

Government Ministry	NGO or Community Group
<input type="checkbox"/> <i>Evidence of entity type - Letter of support from the Minister or Chief Executive Officer</i>	<input type="checkbox"/> <i>Evidence of entity type – Certificate of incorporation or Letter of Recognition from Ministry of Internal Affairs</i>
	<input type="checkbox"/> <i>Community Development Plan or adopted policy</i>
	<input type="checkbox"/> <i>Letters of support from the community</i>

PLEASE SUBMIT YOUR APPLICATION TO:

THE SECRETARY-T - TONGA CLIMATE CHANGE FUND
DEPARTMENT OF CLIMATE CHANGE
MINISTRY OF METEOROLOGY, ENERGY, INFORMATION, DISASTER MANAGEMENT,
ENVIRONMENT, CLIMATE CHANGE AND COMMUNICATION (MEIDECC)
NUKU'ALOFA

FOR OFFICE USE ONLY:

Date application received: _____

Name of receiving officer: _____

Details recorded in database: Y / N

Project Application number issued: _____
