APPLICATION TO PUBLIC CALL

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Local self-government unit

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| **15.02.0-N2.3-15247** |

Call number

Submit the completed application as described in the Public Call.

Electronic version of the form is available at: http://ppmg.ba/ba/grantovi/otvoreni-pozivi.

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| **Full name of the local self-government unit (municipality/city/District)** |       |
| **Address:** |       |
| **Telephone, fax, email** |       |       | @ |
| **Internet address** | http://       |
| **Number of employees in the local self-government unit** |       |
| **Contact person for participation in the Program** |       |
| **Contact information of the person responsible for the project (phone, email)** |       | @ |
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| **Population and source of population data**  |       |
| **Level of development of local self-government unit1** |       |
| **Percentage of employed persons working in the private sector out of the total number of employed persons in the local self-government unit** |      % |
| **Number of private enterprises per 1000 residents in the local self-government unit** |       |
| **The amount the local self-government unit is willing to allocate for the Program, which will be matched by USAID** |      BAM |
| **The local self-government unit is able to allocate the planned funds in June 2020 at the latest.** | [ ]  No [ ]  Yes |
| **Has the local self-government unit implemented self-employment programs in the past two years (2018 and 2019)?** | [ ]  No [ ]  Yes, the following programs:      |
| **Did your local self-government unit fund self-employment programs for marginalized groups using their own budget funds?**  | [ ]  No [ ]  Yes, and the total amount in the past two years was:     BAM |
| **We are able to, if required, send documentation proving that budget funds have been allocated for this purpose.**  | [ ]  Yes [ ]  No |

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| **Supplementary documents that may be useful for the evaluation of the application**  | [ ]       [ ]       [ ]        |

Additional notes

In the box below, you can provide any additional information you consider relevant and were not prompted to provide above, write comments, or give information you think we should know.

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| **Application submitted on (date)** |       |
| **Name and signature of the person authorized to represent the mayor** |       |

1 In accordance with the official methodology and classification performed by competent entity institutions:

Federation of Bosnia and Herzegovina Federal Institute for Development Programming / Socio-economic indicators by municipality in FBiH for 2018

Republika Srpska: Decision on the level of development of local self-government units in Republika Srpska for 2020