

FUNDING REQUEST APPLICATION FORM

Tailored to Challenging Operating Environments

SUMMARY INFORMATION			
Applicant			
Component(s)			
Principal Recipient(s)			
Envisioned grant(s) start date		Envisioned grant(s) end date	
Allocation funding request		Prioritized above allocation request	

IMPORTANT:

To complete this funding request, please:

- Refer to the accompanying **Funding Request Instructions: Tailored to Challenging Operating Environments**;
- Refer to the Information Note for each component as relevant to the funding request, and other guidance available, found on the [Global Fund website](#);
- Ensure that all mandatory attachments have been completed and attached. To assist with this, an application checklist is provided in the Annex of the *Instructions*;
- Ensure consistency across documentation before submitting.

Applicants are encouraged to submit a joint funding request for the eligible disease components and resilient and sustainable systems for health (RSSH).

Joint TB/HIV submissions are compulsory for a selected number of countries with highest rates of co-infection. See the [related guidance](#) for more information.

This funding request includes the following sections:

Section 1: Context related to the funding request

Section 2: Program elements proposed for Global Fund support, including rationale

Section 3: Planned implementation arrangements and risk mitigation measures

Section 4: Funding landscape, co-financing and sustainability

Section 5: Prioritized above allocation request

SECTION 1: CONTEXT

This section should summarize the country context. Attach and refer to key contextual documentation justifying the choice of interventions proposed. To respond, refer to additional guidance provided in the *Instructions*.

SECTION 1.1

Provide a **concise** analysis of the context for the funding request, addressing the points below. Highlight what has changed since the last time you applied.

- a) Outline specific contextual challenges (e.g. conflict/security risks, high cross-border population movement, natural disasters, disease outbreaks, governance issues, etc.) that affect progress towards improving outcomes/impact against the disease(s) and/or building resilient and sustainable systems for health (RSSH).
- b) Provide a concise summary of the epidemiological context and highlight how the national strategy documents, program reviews and lessons learned from existing programs informed the development of the funding request. In the absence of effective governance structures, national strategies, and in case of gaps in epidemiological data particularly on vulnerable and key populations, explain the assumptions taken in developing this request, including any plans to address such strategic information gaps going forward.
- c) Summarize the key human rights, gender-related, geographic and other barriers to services, and outline, as applicable, interventions that are being implemented to address these barriers, including the lessons learned.
- d) Briefly describe the status of the health system outline the main areas that require strengthening to build RSSH, or, to ensure delivery of essential services as applicable, e.g. in acute emergency settings.

(maximum 3 pages per component)

[Applicant response]

Annex reference	Title and date of reference document	Relevant section(s)
	<i>List and attach the relevant documents referenced in your summary. Add rows as needed.</i>	

SECTION 2 – FUNDING REQUEST (Within Allocation)

This section should describe and provide a rationale for the program elements proposed for this funding request. Attach and refer to completed **Programmatic Gap Table(s), Funding Landscape Table(s), Performance Framework and Budget**.

To respond, refer to additional guidance provided in the *Instructions*.

SECTION 2.1 and 2.2

Considering the context and lessons learned:

- 2.1. Describe the funding request for the disease program(s), and how it will contribute to maximizing outcomes/impact.
- 2.2. Describe the funding request to support or strengthen resilient and sustainable systems for health (RSSH).

Your responses to questions 2.1 and 2.2, should clearly address the following points:

- a) The rationale for prioritization of modules and interventions in the disease and/or RSSH request;
- b) How the request will ensure continued scale up for impact where feasible, relevant and sustainable, and maintenance of existing services or essential services provision, depending on the context;
- c) By highlighting relevant modules/interventions and associated budget, explain how the funding request meets the *Focus of Application Requirement*¹ which asks for, as appropriate, inclusion of interventions that respond to human rights and gender-related barriers, vulnerabilities and inequities in access to services;
- d) How the program complements domestic and other donor efforts, including how partnerships, coordinated action and integrated service delivery will be strengthened to maximize program outcomes/impact, depending on the context.
- e) **For acute emergency contexts** (e.g. high security risk settings, etc.), present contingency plans describing the scope of interventions that will be implemented when circumstances change (whether they deteriorate or improve), including the factors that would trigger a shift to the contingency plans.

(maximum 5 pages per component)

[Applicant response]

¹ See the Global Fund [Sustainability, Transition and Co-Financing Policy](#).

SECTION 3: IMPLEMENTATION AND ASSOCIATED RISKS

This section describes the planned implementation arrangements and foreseen risks for the proposed program(s). Applicants are encouraged to attach an updated **Implementation Arrangements Map** and refer to information on risks provided during Country Dialogue. To respond, refer to additional guidance provided in the *Instructions*.

SECTION 3.1. Implementation arrangements

Clearly describe the implementation arrangements, including rationale for continuing or changing current arrangements and how key interventions will be operationalized.

- a) Provide a rationale for continuing or changing implementation arrangements, as applicable.
- b) Explain how key program interventions will be operationalized, who the relevant entities responsible for implementation are and what their roles and responsibilities will be by using the table below.

(maximum 2 pages per component)

[Applicant response]

Program module/intervention	Responsible entity	Responsibility in program implementation

Add rows as applicable

SECTION 3.2 Key implementation risks

Using the table below, outline key risks foreseen, including those that were provided in the Key Program Risks table shared by the Global Fund during the Country Dialogue process. You can also add key operational and implementation risks, which you identified as outstanding from the previous implementation period, and the specific mitigation measures planned to address each of these challenges/risks to ensure effective program performance in the given context.

Response to be put into the table below.

Risk category (Functional area)	Key risk	Mitigating actions	Timeline

Add rows for additional key risks as necessary

SECTION 4: FUNDING LANDSCAPE, CO-FINANCING AND SUSTAINABILITY

This section is not applicable to applicants for whom the Global Fund has granted, in the allocation letter, exemption from co-financing requirements (notably, countries in acute emergency). Attach and refer to the completed **Funding Landscape Table(s)**. To respond, refer to additional guidance provided in the *Instructions*.

SECTION 4.1 Co-financing

Briefly explain the following:

- a) Trends and actions for increasing government expenditure on health to meet universal health coverage goals and objectives
- b) Have previous Government commitments for the 2014-16 allocation been realized? If not, provide reasons below.
- c) The extent to which government co-financing commitments for the 2017-19 allocation meet the Global Fund co-financing requirement² for your country, as set forth in the allocation letter. Provide a justification if the requirement is not met.

(maximum 1 page per component)

[Applicant response]

² Refer to the [Sustainability, Transition and Co-Financing Policy](#).

SECTION 4.2 Sustainability

Briefly describe which specific disease and health systems program costs will be financed by government resources over the next implementation period to support sustainability of the proposed program(s), including:

- a) How realization of such commitments will be tracked and reported;
- b) Risks, if any, that could potentially affect fulfilment of the expected government and donor support, and the implications these would have on the program(s).

(maximum 1 page per component)

[Applicant response]:

5. Prioritized Above Allocation (PAAR)

To complete a PAAR, please fill-in the attached Excel template