

FUNDING REQUEST INSTRUCTIONS: Tailored to Material Change

These instructions guide the applicant through the funding request application tailored to Material Change and supporting documents. It should be read by all stakeholders engaged in the development of the request. Each funding request refers to the existing grant and concept note(s) reviewed by the TRP during the allocation cycle 2014-2016 and outlines the rationale for Global Fund investment. The applicant's response should be guided by a national health strategy, a national disease strategic plan or investment case and draw on an inclusive multi-stakeholder country dialogue process. The request revise priorities of country's needs due to changes occurred within a broader context (epidemiological and financial). Ultimately, the funding request aims to maximize the impact of the investment by reaching the greatest number of people and by achieving the greatest possible effect on disease control or elimination.

The instructions are divided into four parts:

- **Part I** outlines generic guidance to help an applicant start and complete the funding request;
- **Part II** describes each section of the funding request and provides, where appropriate, more detailed guidance regarding what is required;
- **Part III** describes the required attachments accompanying the funding request;
- **Part IV** includes checklists to facilitate submission of a complete and comprehensive funding request.

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For questions, please contact accesstofunding@theglobalfund.org

PART I: GETTING STARTED

Introduction

These instructions are designed to support the preparation of a Tailored Review Material Change Funding Request for the 2017-19 allocation cycle, for which grants will be implemented during the 2018-2020 period.

They are meant to complement guidance provided in the application form (also referred to as the “narrative”) and core documents for the funding request. Where needed, they include links to relevant technical guidance, policy and other reference documents.

Differentiated application and review processes

The Global Fund has introduced a new approach in applying for funding, called the “Differentiated Application Process”. The objective is to allow for flexible and tailored funding requests that are “right-sized” to match the needs and context of a country. The differentiation of the application process also aims to ensure greater time is spent implementing grants to save lives. The three differentiated approaches to accessing funding are:

1. Program continuation
2. Tailored review (Challenging Operating Environments; Transition; National Strategy Based Pilots; or Material Change), and
3. Full review.

These instructions are for “Tailored review to material change” applications.

For more information on the differentiated application approaches, please see the [Applicant’s Handbook: A practical guide to preparing a funding request](#) and the [Operational Policy Note on Access to Funding and Grant Making](#) (*forthcoming*).

Submitting the Application

The country allocation amount and eligible application approach are communicated to applicants in their allocation letters.

Applicants will receive the appropriate application form and attachments from the Global Fund depending on their approved review approach. After completing, the funding request (including the narrative and mandatory attachments), submit via email to your Fund Portfolio Manager and copy the Access to Funding Department (accesstofunding@theglobalfund.org).

Joint Submissions

Applicants that have more than one component falling into the same review modality (in this case, tailored to Material Change) have the possibility to submit a joint application. The application form is meant to accommodate: (i) single-component funding requests, e.g. a funding request for malaria; or (ii) joint funding requests, including two or more components, e.g. a funding request combining all three diseases and RSSH, or combining TB and RSSH, or combining HIV/AIDS and TB, etc.).

The Global Fund encourages applicants to submit a joint funding request: it has the added advantage of enabling applicants to present more clearly how the allocation is invested in a comprehensive response to address disease and relevant health system issues, and how the request maximizes synergies between programs.

As specified in their allocation letters, applicants are strongly encouraged to maintain or increase their investments in RSSH during the next cycle. If applicants are submitting separate funding requests for eligible components at different times, rather than in a joint submission, they are strongly encouraged to include their entire request of funds for resilient and sustainable systems for health (RSSH) in a **single** application. This is to ensure a coherent approach and to minimize fragmentation. It is also recommended that the RSSH request be included within the **first** funding request submitted. For example, if a combined malaria and RSSH funding request is submitted as the first application, the applicant is recommended to include its overall request for RSSH (i.e. beyond the RSSH investments related to malaria).

Note that countries with a high co-infection burden of tuberculosis and HIV are required to submit joint TB/HIV funding requests.¹

Use of Existing Country Documentation

The application form is designed to encourage the use of existing country documentation and to avoid unnecessary duplication of information found in source documents. To keep the funding request concise, applicants are required to refer to relevant country-specific documents rather than repeat this information in the narrative. For more information, see detailed guidance under the relevant section in Part II of these Instructions (*Completing the funding request application form*).

The relevant country specific documents need to be clearly referenced and submitted as part of the package. Do not attach documents that are not referenced in the funding request, and reference only those that provide a basis for the choice of interventions.

Page Limitations

Each question provides a maximum page limit for the response. One page corresponds to approximately 500 words. Please respect the page limitation per question and use standard Arial Font in size 11, and single line spacing. Applicants may make use of visual representations (i.e. graphs or tables) to portray key information or trends. These visuals are welcome and can exceed the page limit.

The application form aims to ensure that applicants are as concise and focused as possible in their response. The Global Fund may return applications exceeding page limits for revision and resubmission.

Timing of the Submission

The start date of any grant implementation period must come immediately after the end date of that country component's existing grant implementation period from the preceding allocation period. For example, for a grant ending in December 2017, the implementation start date of the next grant using the allocation for the 2017-2019 cycle would be January 2018. Funding from two different allocation periods must be consecutive and cannot overlap. The allocation for eligible components can be accessed, either jointly or individually, once per allocation period for each component, and must be approved by the Board prior to the end of the allocation period (e.g., by 31 December 2019). The planning and implementation of grants should be aligned with country planning cycles. The standard grant duration for Global Fund financing is three years, unless otherwise approved by the Board.

¹ Countries with a high co-infection burden of tuberculosis and HIV include: Angola, Botswana, Cameroon, Central Africa Republic, Chad, Congo, Congo (Democratic Republic), Ethiopia, Ghana, Guinea-Bissau, India, Indonesia, Kenya, Lesotho, Liberia, Malawi, Mozambique, Myanmar, Namibia, Nigeria, Papua New Guinea, South Africa, Swaziland, Tanzania (United Republic), Thailand, Uganda, Zambia, and Zimbabwe.

Please refer to the [Applicant's Handbook](#) for more information on the allocation methodology, and for details on the implementation period and extensions, see the [Operational Policy Note on Grant Revisions](#).

Translation of Documents

The Global Fund accepts application documents in English, French, Spanish or Russian. The working language of the Secretariat and the Technical Review Panel (TRP) is English.

The Global Fund will translate only the narrative and **core application documents** (for example, funding request narrative and mandatory tables) submitted in French, Spanish or Russian. Supplementary attachments can be submitted in the documents' original language but translation by the Global Fund will be limited to specific sections that have been referenced in the funding request. Therefore, it is important for applicants to specify relevant sections, using page numbers to indicate pertinent information. As the Secretariat cannot ensure translations of all supplementary documents, applicants **are additionally encouraged to submit the most critical attachments in English**. Whenever possible, applicants are **encouraged** to translate all required documents into English before submission. Please contact your FPM if needed

PART II: COMPLETING THE FUNDING REQUEST APPLICATION FORM

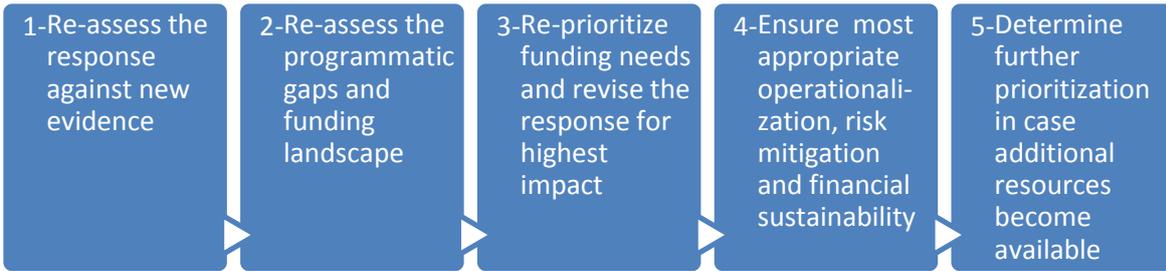
The development of the Material Change Funding Request forms an integral part of an on-going country dialogue process, in which a broad range of stakeholders are engaged to identify needs, work on national strategies, build resource mobilization efforts and prioritize interventions and actions that will make the most impact. For an application to be successful, existing national strategy documents that accurately reflect the context, including other available up-to-date sources of information should serve as the basis for the funding request.

Applicants are encouraged to take different steps to analyze available strategic information before and during the funding request development process. These steps may include, for example, assessing the changes that occurred since the last TRP review and during grant implementation through epidemiological and impact assessments, program reviews, and updated gap analyses. Applying strategic investment thinking throughout the funding request development process is critical to prioritizing funding for interventions that would yield maximum impact. During these steps and throughout the country dialogue process, it is important to ensure meaningful engagement of key and vulnerable populations² as applicable and civil society organizations involved in responding to the diseases.

See the Guidance Note on Global Fund Country Dialogue (*forthcoming*) for additional information.

The funding request is designed to follow the logical flow outlined below:

² The Global Fund defines key populations as groups that experience both increased impact from one of the diseases and decreased access to services. It also includes groups that are criminalized or otherwise marginalized. For example, in the context of HIV, key populations include: men who have sex with men, transgender people, sex workers, people who inject drugs, and people living with HIV. The Global Fund also recognizes vulnerable populations, who are those who have increased vulnerabilities in a particular context, i.e. adolescent/women and girls, miners and people with disabilities. For a complete definition, refer to the following link to the Global Fund [website](#).



While this Funding request is tailored to focus on change(s) in defined programmatic areas, it is important to provide an overall view of the disease response. That is, applicants should present their request for Global Fund funding within a holistic picture of the programmatic and financial gaps of the disease response rather than a more narrow, grant-specific view.

Before finalizing and submitting the funding request, applicants are encouraged to use the TRP review criteria (Annex 1) as a checklist for reflecting on the quality and robustness of their proposed request.

SUMMARY INFORMATION

The summary information section of the application template seeks information important for administrative purposes. Under “applicant”, identify the appropriate country or multi-country entity. Under “component”, list all relevant components included in this funding request. Under the “allocation funding request” and “prioritized above allocation request” indicate the respective amounts and whether they are given in US dollars or Euros. Ensure that the respective amounts entered are consistent across all application documents. The currency indicated here will be the same as during implementation as per the allocation letter.

SECTION 1: CONTEXT

For programs to be positioned to maximize impact, their design must be grounded in the epidemiological, operational, social, political and economic realities of the country or regional context and draw on results achieved and lessons learned from previous implementation periods. The first section of the funding request asks applicants to indicate the main changes that occurred since the last TRP review and during grant/program implementation, leading to need for changes to the Global Fund funded programs. These changes should be described as they inform the choice of interventions in the request. The changes highlighted and the development of the funding request should draw from the most recent and up-to-date national strategy documents, assessments, and program reviews, etc.

1.1. Background: Changes to the Country Context

There are a number of events that may trigger a need to revise the Global Fund investments in comparison with the last TRP review to ensure the funding is invested most strategically for the next implementation period.

The table in this section of the funding request lists, in a systematic way, the material changes that might have occurred in the country, leading to the need to revise and/or re-prioritize certain program areas funded by the Global Fund. The applicant should use, as a starting point, its most recent funding application that was reviewed by the TRP, along with grant documents issued from this strategic technical review. By collecting and assessing new information available, applicants can then assess and indicate the changes that have led them to propose modification (s) to the current Global Fund investments. Applicants are requested

to be critical in their assessment and are encouraged to revisit specific program areas to ensure maximum impact of GF investments and overall sustainability of the program(s).

Please refer to the Instructions for Program Continuation and the [Global Fund Operational Policy Note on Reprogramming During Grant Implementation](#) for examples of material changes.

1.2 Summary of the Country Context

Building on the changes indicated in question 1.1, applicants are asked to describe the major reasons for the programmatic changes including what these changes are and the rationale regarding why a revision of the current investment is being proposed. The purpose of this description is to serve as the starting point for justifying the revision to the Global Fund's investments, to be detailed later in Section 2. It should refer to the existing and latest sources of information available, which are to be annexed to the funding request. The sources could include, for example, program reviews, assessments, surveys on human rights and gender related barriers to effective programs, etc. Applicants may also indicate whether changes have yet to be reflected in these national documents and whether they are forthcoming.

This section also includes a reflection on lessons learned, highlighting the successes and as well as challenges in reaching the programmatic targets set in the past implementation, drawing from the past allocation cycle and from other donors' programs, where applicable. For example, applicants could describe what worked well and can be replicated or enhanced, what programmatic approaches did not deliver anticipated results, and how obstacles or limitations will be addressed to increase the outcomes and impacts of the response. In particular, attention should be paid to any inequalities in access to services, and program performance relating to key and vulnerable populations, efforts to reduce human rights and gender related barriers to services, and the role played by communities in past programs.



Useful documents for completing this section:

- [Global Fund Information Notes on: HIV; TB; Malaria; and Building Resilient and Sustainable Systems for Health through Global Fund Investments](#)
- [Global Fund Technical Briefs](#)
- [Global Fund Key Populations Action Plan](#)
- [Global Fund Gender Equality Strategy](#) and [Strategy in Relation to Sexual Orientation and Gender Identities](#)
- Applicants' own grant documents and previous concept note(s)
- [Global Fund Operational Policy Note on Reprogramming During Grant Implementation](#)
- The SC paper with material triggers?

SECTION 2: FUNDING REQUEST



It is helpful for applicants to complete the Programmatic Gap Table(s), Funding Landscape Table(s), Budget and Performance Framework prior to filling in questions under this Section.

Having established the broader context requiring the need to revise and/or re-prioritize certain program areas from the last grant(s) funded by the Global Fund, this section details the applicant's request within the allocation amount and focuses on the proposed changes to the existing program. These changes can include key program interventions to be added, modified or removed; the change of scope and/or scale of a program by amending the modules, interventions, indicators and targets to respond to the new country context.

This section also asks applicants to describe the re-prioritization resulting from these changes and proposed for funding, as applicable. Indeed, applicants should ensure that they address in their response how this revised prioritization leads to effective and efficient use of Global Fund investments. Effective prioritization of programmatic modules, interventions, areas of highest disease burden and key and vulnerable populations is essential to ensuring available resources are well positioned to maximize impact, with a view to ending the diseases.

The applicants are invited to explain how the proposed changes in the investment are strategically focused and technically sound to maximize impact against the diseases and contribute to building resilient and sustainable systems for health.

If it was indicated in question 1.1 that the 2017-2019 Global Fund allocation for the disease component is significantly lower as compared to the current grants' spending levels³, applicants should provide an explanation in this section regarding how the scope of the program will be maintained and/or increased and what are the alternative sources of funding to be relied up.

The applicant response in this section builds on the gap analyses outlined in the **Programmatic Gap Tables and Funding Landscape Tables**. The analysis in these tables will need to align with the indicators and targets that are set for each module in the **Performance Framework**, as well as with the costing of modules and interventions in the **Budget**. It is important to ensure consistency across these documents; for example, coverage levels in the programmatic gap table should be linked with the coverage targets suggested in the Performance Framework.

Completion of the core documents as well as a short summary of the program funded included in the cover note will provide a holistic view of the program response funded by the Global Fund, in which this funding request takes place.

In case of joint funding requests including multiple components, applicants will need to answer the question for each component and specifically address the expected impact, coordination and efficiencies achieved from the joint programming. The descriptions should highlight how the program will actively involve communities in the programs in order to maximize impact.

Joint programming and service delivery hold high potential for enhancing efficiency and effectiveness of programs. For applicants required to submit a joint TB/HIV funding request, applicants should consider the expected coordination and resulting efficiencies and impact

³ We suggest to compare the new allocation amount with the current spending on a yearly basis, past and/or forecasted. For example using the last year spending multiplied by 3.

achieved from the joint programming. The applicant's response in this section should also describe the level to which service delivery systems are integrated and the extent to which their respective policy development processes are coordinated. Please refer to the Information Notes on HIV and TB for technical guidance. For other applicants who have chosen to submit a joint funding request, they are invited to also describe efficiencies and integration of services that will be reached.

Moreover, as already mentioned, the Global Fund encourages applicants to present, in a single application (rather than fragmented amongst different funding requests), their vision for investment in resilient and sustainable systems for health so as to contribute to avoiding duplication and ensuring synergies and efficiencies in health systems-related investments. Applicants are asked, in question 2c), to explain how building RSSH is strengthened within this request. However, as context-specific situations may require an applicant to request RSSH support at different times and/or in a different application applicants may briefly highlight here the elements of the planned RSSH investment that will directly support the disease program in this funding request.

Note: When presenting the funding request, applicants from Lower-Middle Income (LMI) and Upper-Middle Income (UMI) countries must ensure that selected modules and interventions for this allocation cycle meet **the focus of application requirement**.⁴ Applicants are then asked to confirm that they have met this requirement. The focus of application requirement aims to further ensure that the allocation is strategically invested towards key and vulnerable populations and towards addressing human rights and gender-related barriers, so as to achieve highest impact. While this requirement is applicable to LMI and UMI countries, all Global Fund investments, irrespective of the income category of the applicant, must include, as appropriate, interventions that respond to human rights and gender-related barriers and vulnerabilities in accessing services.

Please refer to the relevant Global Fund Information Note(s) for further technical guidance in developing the funding request.



Useful documents for completing this section:

- [Global Fund 2017 Eligibility List](#)
- [The Global Fund Sustainability, Transition and Co-Financing Policy](#)
- [Global Fund Information Notes on: HIV; TB; Malaria; and Building Resilient and Sustainable Systems for Health through Global Fund Investments](#)
- [Global Fund Modular Framework Handbook](#)
- [Global Fund Technical Briefs](#)
- [Global Fund E-learnings](#)

⁴ [Global Fund Sustainability, Transition and Co-financing policy](#)

SECTION 3: OPERATIONALIZATION AND RISK MITIGATION

Section 3 is about further contextual considerations such as the implementation arrangements and implementation risks.

3.1 Implementation Arrangements Summary



Applicants are recommended to update their existing implementation arrangements map.

In this section, applicants are asked to describe any changes to their implementation arrangements as relevant, including streamlining efforts. Applicants are encouraged to update and submit their existing implementation arrangements map that was developed during grant-making in the previous allocation cycle, indicating where changes have been made

Examples of significant changes to implementation arrangements can include: change of key implementers (principal recipient and main sub-recipients), as far as this change will impact the program's interventions; substantial modification in the flow of funds or commodities (i.e. new procurement arrangements), etc. Applicants may refer to the CCM Eligibility Requirement 2 for more information on the selection of the principal recipient. If you have questions on whether the changes you are envisaging are considered significant, please consult your Fund Portfolio Manager.

The Global Fund encourages applicants to consider dual-track financing, which is the inclusion of both government and non-government principal recipients in the implementation of Global Fund grants for each component (refer to the [Applicant's Handbook](#)).

3.2 Key Implementation Risks

The applicant is invited to refer to the list of the *Key Program Risks* shared by the Global Fund as part of the Country Dialogue process as well as any other additional key risks (if applicable) foreseen during the implementation of this funding request. Applicants are asked to specify the mitigating action(s) they intend to put in place to address each risk, to ensure effective program performance. When the Secretariat communicated the list of key risks, it may have included mitigating actions that were agreed with the implementer(s). In such cases, the applicant is requested to review and provide any comments or recommendations on how to improve the existing mitigating actions, or if additional mitigating actions should be included. Applicants can refer to any investment proposed in Section 2 of the funding request that aims at addressing risks as applicable.

Important risk areas, whether programmatic or pertaining to implementation, may include, but are not limited to:

- Programmatic/monitoring and evaluation risks (e.g. data quality and program quality, access and promotion of equity and human rights, sustainability, etc.)
- Procurement and supply management risks (e.g. forecasting and quantification, procurement, storage and distribution, last mile delivery, commodity prices higher than international prices, etc.)
- Financial risks (e.g. risk of fraud, corruption or theft, financial inefficiency, etc.)
- Governance and program management risks (e.g. CCM coordination and oversight of programs, PR coordination with national entities and partners, PR oversight of sub-recipients, meaningful involvement of communities, etc.)

Applicants could also include external risks that may have negative or unintended consequences on program implementation and performance. These could include, but are not limited to:

- Macroeconomic factors, including unexpected rises in commodity prices, inflation and average exchange rate in relation to local market currencies;
- Instability of the country in terms of significant political changes or social unrest, ongoing conflicts, humanitarian crises, poor physical infrastructure, natural disasters, corruption; and
- Upcoming country elections or significant changes in national leadership likely to impact program implementation.

Applicants need to take key risks into account at the funding request stage to ensure adequate funding is earmarked to cover the cost of mitigating measures. This earmarked funding could come from the allocation or from domestic or other sources.

SECTION 4: FUNDING LANDSCAPE, CO-FINANCING AND SUSTAINABILITY



If not already done, it is helpful if the Funding Landscape Table(s) are completed prior to filling in this section of the application form.

To achieve lasting impact and long-term sustainability of national responses in the fight against the three diseases, financial commitments from domestic sources must play a key role in national strategies. The resources allocated by the Global Fund are far from sufficient to address the full cost of a technically sound program. It is therefore critical to assess how the requested funding fits within the overall funding landscape, including domestic and other donor funding, and how the national government plans to commit increased resources to the national disease program and health sector each year.

The following provides an outline of the key review objectives for applicants to assess in this section:

Key Review Objectives	Elements to Assess
Assess trends and actions for increasing government expenditure on health to meet universal health coverage goals and objectives	Trends in government health expenditure
	Planned actions/reforms to increase domestic resources for health, as well as to enable greater efficiency and effectiveness of health spending
	Global Fund support for health financing strategy and/or for implementing health financing reforms
Assessment of realization of co-financing commitments of previous allocation cycle (previously referred to as willingness to pay)	Assess evidence of realization of commitments
	Provide justification, if commitments are not met
Assess the funding landscape	Assess funding needs and key cost drivers
	Assess available funding and gaps for key program areas
	Assess planned actions for addressing funding gaps

Ensure domestic commitments in the next allocation cycle meet the minimum requirement to access the co-financing incentive	Assess if co-financing is increasingly taking up key costs of national disease plans and/or supporting health system interventions
	Assess interventions or activities that are expected to be co-financed and how realization of these commitments will be tracked and reported.
	Provide justification if co-financing commitments do not meet minimum requirements to access the co-financing incentive
Assess longer term sustainability	Assess key sustainability challenges and actions to address them
	Assess how the funding request supports longer term sustainability of the program

4.1 Funding Landscape and Co-Financing

In addition to completing the table in question 4.1, applicants need to include as relevant an explanation and/or justification linked to their assessment of the funding landscape and co-financing. For instance,

- 4.1a) If there are current or planned actions/reforms to increase domestic resources for health, applicants are asked to describe what these actions/reforms include, their timeline, and by how much they aim to increase domestic spending for health.
- 4.1b) Applicants are asked, as applicable, to briefly describe specific activities for which funding is requested to support development of a health financing strategy and how this will support national universal health coverage goals and objectives.
- 4.1c) If government commitments for the 2014-16 allocation cycle have not been fully realized, applicants will need to provide reasons for the lower levels of government spending.
- 4.1d) Applicants will also need to provide justification if co-financing commitments for the 2017-19 allocation cycle are not in line with policy requirements and/or do not meet minimum requirements to fully access the co-financing incentive. Furthermore, if it was indicated in question 1.1 that there changes in domestic or international financing resulting in material impact on funding availability for programmatic interventions and sustainability, applicants should also describe here how these changes impact the country's ability to meet cofinancing (previously known as "willingness to pay") commitments for the current grant implementation period and if these changes will impact the country's ability to make and realize future co-financing requirements in the next implementation phase.
- 4.1e) Applicants are asked to specify the mechanism by which co-financing commitments will be tracked and reported over the next implementation period. Actions that have been identified to improve disease and health spending data should be aligned with methodologies and guidelines prescribed by technical partners. Applicants are encouraged to include targeted investments in their funding request to support these actions. If necessary, applicants may designate up to US\$ 50,000 (per disease supported by the Global Fund) for institutionalization of mechanisms for routine health and disease expenditure tracking. The Global Fund is collaborating with the World Health Organization to make available technical assistance for institutionalization of National Health Accounts supported by its grants.

4.2 Sustainability

As a starting point for responding to this question, applicants should assess the overall costs of their national strategy, the availability of funds and the funding gap for major program areas over the implementation period covered by the funding request. Filling in the ‘detailed financial gap’ worksheet for each disease component in the Funding Landscape Table, as relevant to the funding request, will assist applicants in understanding these costs and gaps.

Applicants are asked to reflect upon key sustainability challenges of the program(s) for which funding is requested. The response to this question could include a description of the key actions to improve sustainability of Global Fund financed programs, taking into consideration ongoing and/or planned strategies and reforms related to health financing, resilient and sustainable systems for health, and the legal environment, as applicable. In addition, applicants could briefly describe how the current funding request supports strategies and actions to improve longer-term sustainability of the program(s), in particular those programs that are highly reliant on Global Fund funding that relate to key populations and removing human rights and gender related barriers.



Useful documents for completing this section:

- [The Global Fund Sustainability, Transition and Co-Financing Policy](#)
- [Global Fund 2017 Eligibility List](#)
- [Applicant's Handbook: A practical guide to preparing a funding request](#)

PRIORITIZED ABOVE ALLOCATION REQUEST (PAAR)

Applicants are requested to complete a prioritized above allocation request (PAAR). The PAAR should represent key additional, evidence-based and costed modules/interventions for investment, organized in order of relative importance for the program (high, medium or lower priority).

The Excel-based application template for the PAAR is intended to help applicants present a clear rationale for each module/intervention proposed in the above allocation.

If deemed technically sound, strategically focused and positioned to achieve the highest impact by the TRP, the above allocation request will be put on a register of unfunded quality demand (UQD) maintained by the Global Fund to facilitate funding, should additional resources become available. For example, the registered above allocation request could be funded through efficiencies found within the allocation amount during grant-making, or through additional resources from other donors.

Before completing the above allocation request, **applicants should ensure that the most critical modules and interventions for their program are appropriately covered within the allocation amount.** In their review, the TRP may recommend that modules or interventions be shifted from the above allocation into the allocation request, if they assess that key modules or interventions (e.g. for key and vulnerable populations) were not appropriately accommodated within the available country allocation.

In cases where the above allocation modules are a scale-up of modules described in the within allocation request, the applicant's rationale may be limited to an explanation of how the additional investment will contribute to increase in outcomes and/or impact. In cases where new interventions are being proposed in the above allocation, applicants are encouraged to

briefly describe the activities that will be implemented in addition to explaining how the interventions will improve outcomes/impacts on disease programs and contribute to building resilient and sustainable systems for health.

Lessons learnt from the TRP for the attention of applicants:

- Applicants are recommended to submit a prioritized above allocation request at the same time as funding requests.
- Applicants should note the following when developing the prioritized above allocation request:
 - Contextualize proposed prioritized above allocation request interventions by referring to key epidemiological and coverage data.
 - Include a rationale and explain what incremental impacts the additional funding would achieve if it were available.
 - For each intervention, specifying the order of priority for the program, indicating as applicable the geographic unit and population group that will be served.
- Include essential interventions in the allocation request rather than in the prioritized above allocation request.

MATCHING FUNDS REQUEST (if applicable)

The Global Fund Board has approved an additional funding stream – designated as matching funds – to incentivize eligible countries to align their allocations towards strategic priorities that are critical to driving impact and achieving the Global Fund Strategy 2017-2022.

Eligible countries have been informed of the specific strategic priorities for which they can access matching funds in their allocation letters, as well as the additional funding amount potentially available as matching funds.

If you are eligible to apply for matching funds, please refer to the Global Fund website⁵ for the application form, instructions and relevant guidance on matching funds.

PART III: ADDITIONAL DOCUMENTS INCLUDED IN THE FUNDING REQUEST

In addition to the application form, applicants are required to submit the following core documents as part of their funding request: Funding Landscape Table(s), Programmatic Gap Table(s), Performance Framework and Budget.

Under the current cycle, applicants are no longer requested to submit a modular template. Instead, the Performance Framework and Budget will be used throughout the cycle, from the application stage through to grant implementation, and filled in progressively based on varying levels of detail.

While the modular template is no longer used, the modular approach, encompassing a framework of standardized programmatic categories called modules, is still used. This framework helps to structure the programmatic and financial gap analyses, and also links

⁵ Refer to the following link for guidance on how to apply for matching funds:
<http://www.theglobalfund.org/en/applying/funding/materials/>

main goals, objectives, interventions, indicators, targets, and costs across the core documents. For more information about the modular framework, refer to the Global Fund [Modular Framework Handbook](#).

In addition to the core documents, applicants are also required to submit: a List of abbreviations and annexes, CCM eligibility documents, CCM endorsement of the funding request and other mandatory attachments (e.g. NSP/NHP). A List of Health Products is a required attachment for countries categorized as “High Impact”, otherwise it is optional. However, it will need to be completed during grant making, as relevant.

A checklist is included as an Annex to these Instructions. Applicants are encouraged to use this tool to evaluate the completeness of their application prior to submission.

Programmatic Gap Table(s)



Programmatic gap tables are required for disease components and optional for RSSH.

Applicants are required to complete programmatic gap tables focusing on the key modules/interventions that are affected by the material change(s) as relevant for each component in the funding request. The purpose of the programmatic gap analysis is to identify the key coverage gaps in the country, per module/intervention, and to estimate how they can be filled by the Global Fund and other support. Key modules are either those that cost the most, or those that are critical to achieving the expected impacts of the funding request. The programmatic gap analysis therefore provides the underlying rationale for prioritization of the selected modules for funding. It provides information on the overall need, the proportion of need already covered, and the proportion of the need that is proposed to be covered by Global Fund funding. The remaining gap in programmatic coverage then serves as a starting point to applicants for their prioritized above allocation request. The programmatic gap analysis focuses on program coverage and does not request the applicant to provide the financial costs associated with these priority modules.

For priority modules for which gaps are difficult to quantify (e.g. when a module is not related to service delivery), the applicant may describe the gaps in coverage in section 2 of the application form.

It is important to ensure consistency, for example, between coverage levels in the programmatic gap tables, and the coverage targets that are suggested in the Performance Framework.

Detailed guidance on how to fill in the table(s) can be found in the Excel file. For the disease components, this guidance includes a comprehensive list of priority modules from which applicants may choose. It is important to note that for HIV and malaria, the Excel file includes both standard and customized gap tables for specific modules, to accommodate for variations in the way gaps are quantified across modules.

Funding Landscape Table(s)



Applicants are asked to complete the ‘health system’ and ‘gap overview’ tabs for the disease components as relevant to the funding request.

Information in the Funding Landscape Table(s) complement the applicant’s response under sections 2 and 4 of the application form. In the form, applicants can make reference to the Table as needed and avoid repeating information.

Applicants must use the Funding Landscape Table(s) to provide financial information pertaining to the national disease strategy.

The Funding Landscape Overview Table identifies:

- i) Funding needed to address the overall response to the disease;
- ii) Current and anticipated funding from **domestic** and **external** sources; and
- iii) Remaining financial gap (the gap between the funding need and available funding).

The Health Sector tab requires information on Government Health Sector Spending and is applicable to all applicants.

Additional detailed tabs in the Excel file seek information on the financial gap by module for each relevant disease component. Applicants can opt to either use Global Fund modules or their own NSP cost categories as the basis for assessing gaps. Countries categorized as High Impact and Upper-Middle Income are required to complete the “detailed financial gap” worksheet for disease component(s) as relevant to the funding request. Although not required, other applicants are also encouraged to complete the worksheet.

Detailed instructions on how to complete the tables are provided in the Excel file.

Performance Framework and Budget

 **The Performance Framework and Budget are now required at the funding request stage, as the Modular Template is no longer used.**

The Performance Framework and Budget are now to be used throughout the funding cycle and will be modified as needed during grant-making and throughout implementation. Though the Performance Framework and Budget now need be completed at the funding request stage in addition to the grant-making stage, the level of detail required varies between the two stages. They are to be filled in at a strategic and high level at the application stage and then further developed during grant-making. A brief overview of the level of detail required at each stage is provided below.

Performance Framework

Annual targets for the impact, outcome and coverage indicators are required at the funding request stage. Bi-annual targets are optional at this time and required at the grant-making stage. Information on progress update reporting dates are required at the grant-making stage only. Workplan tracking measures are optional at the funding request stage and grant-making stage for grants that have a coverage indicator and are required at both funding request and grant-making stages for regional and other grants with no coverage indicator.

Budget

At the funding request stage only a summary-level budget is required, which includes information by module, intervention, cost grouping and implementer. The summary budget is automatically calculated when this high level information is entered in the 'detailed budget' tab of the Excel file. A detailed budget including the associated activity description is not necessary at this stage but will be required at the grant-making stage. Similarly, at the funding request stage, applicants are required to provide an annual budget for three years, while a quarterly breakdown is required at the grant-making stage only. However, it is understood that some applicants might find it more convenient (especially when the time between the funding request approval and anticipated Board approval is intended to be short, applicants could gain efficiency in starting with a detailed budget) to prepare a more detailed budget at the funding request stage. The detailed budget option if desired, is entirely discretionary and based on country preference.

Cost assumptions and key information for the budget should be available at this stage and applicants are recommended to provide this information with the budget. Please refer to the budgeting guidelines for more information.

One Performance Framework and one Budget are to be completed per funding request, respectively. At the grant-making stage, this will be broken down by grant. Refer to the respective Excel files for more detailed instructions on how to fill out the Performance Framework and Budget.

List of Health Products and Related Assumptions and Quantifications Information

 **Filling in the List of Health Products template is only relevant where Global Fund funding is requested to cover Health Products and/or associated management costs.**

The List of Health Products (LoHP) is an outline of the health products and associated costs that will be financed through the funding request. The list includes for each product, the

estimated quantities to be procured for each year of implementation period, their estimated unit cost and costs related to their management.

Submitting the LoHP is required for “High Impact” countries at the funding request stage. It is optional at the funding request stage for “Core” countries⁶, depending on the proportion of the funding request allocated to Health Products. The LoHP is not required for “Focused” countries. At application stage, the LoHP, when required, may be filled with lump sum budget for health products other than the key products.⁷

Assumptions and quantifications related to the procurement of health products, as well as their management costs, are underlying considerations that need to be taken into account when developing the LoHP. This information must be provided as supporting documentation to the funding request for countries categorized by the Global Fund as “High Impact”. It is optional and at the discretion of the country teams for “Core” countries and “Focused” countries to submit this information, but Core countries and focused countries are recommended to provide it, especially if the budget accounts for more than 50% of health products and at the discretion of the country team. This information can be submitted in any format convenient to the applicant.

The health products listed and the estimated quantities are highly dependent on the Performance Framework as they are based on programmatic targets, assumptions and supply chain information. Similarly, the LoHP affects the budget as the estimated amounts for each cost category⁸ in the LoHP template feeds into the Budget. The List of Health Products are meant to be used throughout the implementation cycle and modified as needed during grant-making and throughout implementation.

For more information on how to fill in the List of Health Products, please refer to the excel template.

List of Abbreviations and Attachments

Applicants can use the list of abbreviations and attachments to:

- list uncommon or country-specific abbreviations and acronyms used in the application;
- list all supporting documentation relevant to the funding request that are not included in question 1.1.

In the list of annexes, the additional supporting documents should be clearly named and numbered, and the exact page reference (if applicable) should be indicated. In case documents are publicly available online, applicants are recommended to provide corresponding web links, so as to limit the number of documents attached to the funding request.

Similar to the guidance provided under question 1.1, applicants should only attach documents that are relevant to the funding request, and avoid listing a multitude of miscellaneous annexes that may obscure rather than clarify.

⁶ Portfolio Categorization by the Global Fund- list of countries.

⁷ Key health products are defined as products to be reported in the Price and Quality Reporting system. Other products may include consumables for laboratory, other medicines than antiretroviral, anti-malarial and anti-TB pharmaceutical products.

⁸ Cost category 4, 5, 6 and 7.

CCM Eligibility Requirements

The Global Fund requires CCMs to meet six requirements to be eligible for funding, as per the [CCM eligibility requirements](#). Applicants are required to ensure that all six requirements are met. The review of applicant compliance with the six requirements will be based on two separate assessments:

- **Assessment of compliance with eligibility requirements 1 and 2:** CCM compliance with these application-specific requirements will be assessed by the Global Fund Secretariat at the time of submission of the funding request.
- **Assessment of compliance with eligibility requirements 3, 4, 5 and 6:** CCM compliance with these requirements will be conducted on an annual basis using the Eligibility Performance Assessment (EPA) tool.

The CCM Eligibility assessment of requirements 1 and 2 will be based on a differentiated review (i.e. “standard” vs “light” review). The type of review is determined based on the Secretariat’s overall assessment of the CCM Eligibility and performance. This assessment is determined by the outcome of the annual EPA tool as well as additional contextual information from the Global Fund’s Community Right and Gender Department.

The type of review is communicated to the CCM in the allocation letter, with the documentation required at the time of funding request submission. All CCMs should submit a CCM Eligibility Narrative. “Light” review will require from the CCM a “Statement of Compliance”; “Standard” review will require the CCM to submit supporting documents showing evidence.

The CCM Eligibility Narrative and attached documentation can be submitted either **before** or **together** with the funding request, to be submitted via email to your Fund Portfolio Manager and copying the Access to Funding Department (accesstofunding@theglobalfund.org).

Requirement 1: Funding Request Development Process

The development of the funding request needs to be an open, transparent and inclusive process which engages a broad range of stakeholders, in particular key populations. The Global Fund requires all CCMs to:

- a. Coordinate the development of all funding requests through transparent and documented processes that engage a broad range of stakeholders—including CCM members and non-members⁹ representing disease-specific and cross-cutting perspectives (e.g. HSS, human rights, M&E, Procurement and Supply Chain Management (PSM), RMNCH)—in the solicitation and the review of activities to be included in the application.
- b. Clearly document efforts to engage key affected populations in the development of funding requests.

For this requirement, CCMs need to clearly demonstrate that there has been meaningful engagement of key populations during the funding request development process and be able to provide documentation supporting their response.

⁹ Non-CCM members refer to all relevant stakeholders who may not be represented on the CCM but are part of the national disease or overall health sector response.

Requirement 2: PR Nomination and Selection Process

The Global Fund requires all CCMs to:

- a. Nominate one or more PR(s) at the time of submission of their application for funding¹⁰,
- b. Document a transparent process for the nomination of all new and continuing PRs based on clearly defined and objective criteria.
- c. Document the management of any potential conflicts of interest that may affect the PR nomination process

For this requirement, CCMs must be able to demonstrate that PR nomination was undertaken through a transparent decision making process for each PR (including cases where an existing PR has been re-selected) and show evidence how any actual or potential conflict of interest was managed.

Please refer to [CCM Guidelines](#) and the Annex 1 attached to the CCM Eligibility Narrative form for an illustrative list of supporting documents as well as to the [CCM self-assessment tool](#). For questions, contact the Fund Portfolio Manager.

CCM Endorsement of the Funding Request

The Global Fund requires evidence of endorsement of the final funding request by all CCM members (or their designated alternates). A representative of each PR must sign off on the funding request at the bottom of the endorsement sheet confirming that they endorse the funding request and are ready to begin grant-making and implementation.

CCM members unable to sign the endorsement of the funding request need to send an endorsement email to their CCM Secretariat to be submitted to the Global Fund as an attachment.

In cases where a CCM member is unwilling to endorse the funding request, that member is recommended to inform the Global Fund in writing (AccessToFunding@theglobalfund.org) stating the reason for not endorsing the funding request, to ensure that the Global Fund understands the member's position.

National Strategy documents



It is mandatory to attachment National Strategic Plan(s).

As mentioned in Part I of the instructions (*Getting started*), a key principle of Global Fund support is that funding requests be based on robust disease specific or broader health-sector national strategic plans (NSPs) and/or investment case for HIV.

In the absence of robust national strategies, applicants should either work to revise their plans before applying, rely on other available and up-to-date sources of information, or alternatively, conduct a review process at the country level to establish the basis for their funding request. This may require additional time to conduct review process before applying for funding. For more information about NSP development, please refer to the [Applicant's Handbook](#).

¹⁰ In exceptional circumstances, the Global Fund will directly select PRs for the CCM. These circumstances include those countries which are under the Additional Safeguard Policy (ASP) or undergoing an investigation by the Office of the Inspector General.

Applicants are invited to access new funding through a “material change application stream”, but are also categorized by the Global Fund as “COE (Challenging Operating Environments) may rely on other, more ad hoc sources of information rather than national strategy documents to develop the funding request, so long as these other sources are considered to be nationally valid.

For HIV components, requests can be based on an HIV investment case that is developed to complement an existing HIV NSP that may not be robust enough to support a Global Fund application. Please refer to the [Information Note on Strategic Investments for HIV Programs](#) for more information.

Implementation Arrangements Map

Applicants and Principal Recipients are encouraged to update their existing implementation arrangements map that was used at the grant-making stage during the previous allocation cycle, as an annex to their application. If applicants choose to submit an updated implementation arrangements map, changes should be clearly indicated.

An implementation arrangements map is a visual depiction of a grant (or a set of grants), detailing: (i) all entities receiving grant funds and/or playing a role in program implementation, (ii) the reporting and coordination relationships between them, (iii) each entity’s role in program implementation, and (iv) the flow of funds and commodities, and reporting data. Knowns can be clearly recorded in the map and applicants can highlight any areas where there are still uncertainties around program implementation areas.

An updated implementation arrangements map will be required at the end of grant-making to reflect any updated changes and clarify any unknowns.

The [Guidance on Implementation Arrangement Mapping](#) provides further details on this exercise.

ANNEX 1: CHECKLIST FOR ENSURING COMPLETENESS OF APPLICATION PACKAGE

Applicants are encouraged to use the checklist below to evaluate the completeness of their application prior to submission.

<input type="checkbox"/>	Funding Request Cover Note
<input type="checkbox"/>	Funding Request Application Form
<input type="checkbox"/>	Programmatic Gap Table(s)
<input type="checkbox"/>	Funding Landscape Table(s)
<input type="checkbox"/>	Performance Framework
<input type="checkbox"/>	Budget
<input type="checkbox"/>	List of Health Products (if applicable ¹¹)
<input type="checkbox"/>	National Strategies (Health Sector and Disease specific)
<input type="checkbox"/>	Implementation Arrangements Map (optional)
<input type="checkbox"/>	List of Abbreviations and Annexes
<input type="checkbox"/>	CCM Eligibility Requirements documentation: <ul style="list-style-type: none"> • CCM Narrative form • Supporting documentation or Statement of compliance
<input type="checkbox"/>	CCM Endorsement of Funding request
<input type="checkbox"/>	All supporting documentation referenced in the funding request

¹¹ See the Instructions on page XX for specific details regarding submission requirements.