
Funding Request Form

Allocation Period 2020-2022

Refer to the “Tailored for Focused Portfolios” Instructions to complete this form.

Summary Information

Country(s)	
Component(s)	
Planned grant(s) start date(s)	
Planned grant(s) end date(s)	
Principal Recipient(s)	
Currency	
Allocation Funding Request Amount	
Prioritized Above Allocation Request (PAAR) Amount¹	
Matching Funds Request Amount² (if applicable)	



¹ PAARs can only be submitted with the Funding Request. To complete a PAAR, fill-in the Excel template that you will receive from the Global Fund Secretariat.

²This is only relevant for applicants with designated matching funds as indicated in the allocation letter.

Section 1: Funding Request and Prioritization

To respond to the questions below, refer to the *Instructions*, as well as national strategy documents, **Programmatic Gap Table(s)**, **Funding Landscape Table(s)**, **Performance Framework**, **Budget and Essential Data Table(s)**.

1.1 Overall Context and Funding Priorities

a) Highlight the critical elements of the **country context** that informed the development of this funding request, including key and/or vulnerable populations, human rights and gender considerations.

[Applicant response]

Given the country context, size of the Global Fund's allocation, latest available data, and guidance in the allocation letter:

b) Summarize the **approach used for the prioritization** of modules and interventions (or in the case of Payment for Results, the performance indicators and/or milestones).

[Applicant response]

c) Fill in **one table for each disease component**, and an additional table for integrated or cross-cutting programming, such as TB/HIV or Resilient and Sustainable Systems for Health (RSSH) modules, to describe the areas prioritized for this funding request.

Component	
Module/interventions	
Priority populations	
Barriers and inequities	
Rationale	
Expected Outcome	

Component	
Module/interventions	
Priority populations	
Barriers and inequities	
Rationale	
Expected Outcome	

(Add additional tables as relevant)

d) Does any aspect of this funding request use a **Payment for Results** modality?

Yes No

If **yes**, in the table below, indicate the relevant performance indicators and rationale for the choice of performance indicators and/or milestones.

Performance indicator or milestone	Target				Rationale for the indicator/milestone selection for Global Fund funding
	Baseline	Y1	Y2	Y3	
Add rows if necessary					
Total amount requested from the Global Fund					

Specify how the accuracy and reliability of the reported results will be ensured.

[Applicant response]

e) **Opportunities for integration:** Explain how the proposed investments take into consideration:

- Needs across the three diseases and other related health programs;
- Links with the broader health systems to improve disease outcomes, efficiency and program sustainability.

[Applicant response]

f) Summarize how the funding request complies with the **application focus requirements** specified in the allocation letter.

[Applicant response]

g) Explain how this funding request reflects **value for money**, including examples of improvement in value for money compared to the current allocation period. To respond, refer to the *Instructions* for the Global Fund’s definition of value for money.

[Applicant response]

1.2 Matching Funds (if applicable)

This question should only be answered by applicants with designated matching funds, as indicated in the allocation letter.

Describe how the **programmatic and financial conditions**, as outlined in the allocation letter, have been met.

[Applicant response]

Section 2: Operationalization and Implementation Arrangements

To respond to the questions below, refer to the *Instructions* and an updated **Implementation Arrangement Map**³.

a) Describe how the proposed **implementation arrangements** will ensure efficient program delivery.

[Applicant response]

b) Describe the role that **community-based organizations** will play under the implementation arrangements.

[Applicant response]

c) Is the Principal Recipient an **international institution** (for example, international NGO or UN agency)?

Yes No

If **yes**, describe how the Principal Recipient's responsibilities pertaining to the national disease response will eventually be **transferred to national entities**. Also, (i) outline the timeframe for transitioning these responsibilities, and (ii) explain how national capacities will be strengthened to lead the national disease response.

[Applicant response]

d) Describe the **top three anticipated implementation risks** that might negatively affect: (i) the delivery of the program objectives supported by the Global Fund; and/or (ii) the broader health system. Then, describe the mitigation measures that address these risks.

Key Implementation Risks	Corresponding Mitigation Measures

³ An updated implementation arrangement map is mandatory if the program is continuing with the same PR(s). In cases where the PR is changing, the implementation arrangement map may be submitted at the grant-making stage.

e) Does the funding request envisage a **joint investment platform** with other institutions?

- Yes No

If **yes**, describe specific arrangements and modalities.

[Applicant response]

Section 3: Co-Financing, Sustainability and Transition

To respond to the questions below, refer to the *Instructions*, the domestic financing section of the allocation letter, the [Sustainability, Transition and Co-Financing Guidance Note](#), **Funding Landscape Table(s)**, **Programmatic Gap Table(s)**, **Transition Workplan** and **Transition Readiness Assessment** (if available).

3.1 Co-Financing

a) Have **co-financing commitments** for the **current** allocation period been realized?

- Yes No

If **yes**, attach supporting documentation demonstrating the extent to which co-financing commitments have been met.

If **no**, explain why and outline the impact of this situation on the program.

[Applicant response]

b) Do **co-financing commitments** for the **next** allocation period meet minimum requirements to fully access the co-financing incentive?

- Yes No

If details on commitments are available, attach supporting documentation demonstrating the extent to which co-financing commitments have been made.

If co-financing commitments do not meet minimum requirements, explain why.

[Applicant response]

c) Summarize the **programmatic areas** to be supported by domestic co-financing in the next allocation period. In particular:

- i. The financing of key program costs of national disease plans and/or health systems;
- ii. The planned uptake of interventions currently funded by the Global Fund.

[Applicant response]

3.2 Sustainability and Transition

- a) Based on the analysis in the **Funding Landscape Table(s)**, describe the funding need and anticipated funding, highlighting gaps for major program areas in the next allocation period. Also, describe how (i) national authorities will work to secure additional funding or new sources of funding, and/or (ii) pursue efficiencies to ensure sufficient support for key interventions, particularly those currently funded by the Global Fund.

[Applicant response]

- b) Highlight **challenges** related to sustainability (see indicative list in the *Instructions*). Explain how these challenges will be addressed either through this funding request or other sources. If already described in the national strategy, sustainability and/or transition plan, and/or other documentation submitted with the funding request, refer to relevant sections of those documents.

[Applicant response]

- c) If you have developed and implemented a transition workplan in the current allocation cycle, provide a status **update** as to what has been achieved.

[Applicant response]

Annex 1: Documents Checklist

Use the list below to verify the completeness of your application package:

<input type="checkbox"/>	Funding Request 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"/>	Prioritized above allocation request (PAAR)
<input type="checkbox"/>	Implementation Arrangement Map(s) ⁴
<input type="checkbox"/>	Essential Data Tables (updated)
<input type="checkbox"/>	CCM Endorsement of Funding Request
<input type="checkbox"/>	CCM Statement of Compliance
<input type="checkbox"/>	Supporting documentation to confirm meeting co-financing requirements for the current allocation period
<input type="checkbox"/>	Supporting documentation for co-financing commitments for the next allocation period
<input type="checkbox"/>	Transition Workplan (if available)
<input type="checkbox"/>	Transition Readiness Assessment (if available)
<input type="checkbox"/>	National Strategic Plans (Health Sector and Disease specific)
<input type="checkbox"/>	All supporting documentation referenced in the funding request
<input type="checkbox"/>	Health Product Management Tool (if applicable)
<input type="checkbox"/>	List of Abbreviations and Annexes

⁴ An updated implementation arrangement map is mandatory if the program is continuing with the same PR(s). In cases where the PR is changing, the implementation arrangement map may be submitted at the grant-making stage.