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# CEPF LOl Template

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**LOI Instructions**

Please complete the letter of inquiry per the questions on each page. Remember to follow the guidance in the call for proposals (CFP) and the strategy described in the ecosystem profile.

You are welcome to provide supporting documents, such as maps or letters of community support, as attached files with the submission of this LOI. Please contact the regional implementation team (see CFP for contact details) if you have any questions about your project concept or how to complete this LOI form.

**Ineligible Use of Funds**

CEPF will **not** fund the capitalization of trust funds, the purchase of land, the involuntary resettlement of people, or the removal or alteration of any physical cultural property under any circumstances.

## Section 1: Contact Summary

**About the Applicant**

|  |  |
| --- | --- |
| Name: |  |
| Email: |  |

**About Organization**

|  |  |
| --- | --- |
| **Applicant Organization Legal Name:** |  |
| **Short Name/Acronym:** |  |
| **Total Permanent Staff:** |  |
| **Organization Type:** | Click here to select |
| *CEPF defines a “local organization” to be one that is legally registered in a country within the hotspot where the project will be implemented and that has an independent board of directors or other similar type of independent governing structure. Organizations not fulfilling these two criteria are considered international organizations.* |
| **Organization Status:** | Click here to select |
| **Year Organization Established:** |  |
| **Telephone:** |  |
| **Telephone country code:** |  |
| **Fax:** |  |
| **Website address:** |  |
| **Official email:** |  |

**Mailing Address**

|  |  |
| --- | --- |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **City:** |  |
| **State or Province:** |  |
| **Country:** |  |
| **Postal Code:** |  |

**Physical Address –** *if different from mailing address above*

|  |  |
| --- | --- |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **City:** |  |
| **State or Province:** |  |
| **Country:** |  |
| **Postal Code:** |  |

**Organization Chief Executive**:

|  |  |
| --- | --- |
| **Title:** |  |
| **Given Name:** |  |
| **Family Name:** |  |
| **Country:** |  |
| **Telephone:** |  |
| **Telephone country code:** |  |
| **Email:** |  |

**History and Mission Statement** *(Provide a brief description of your organization’s history and mission, including experience relevant to the proposed project.)*

*Enter Text Here*

*Ineligible Recipients of Funds*

*Government agencies, and organizations controlled by government agencies, are* ***not*** *eligible to receive CEPF funds.*

**Do you represent, or is your organization controlled by, a government agency?**

Click here to reply

*Government-owned enterprises or institutions are eligible only if they can establish the following – please answer the following questions and submit the relevant documentations to support your answers if applicable.*

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution has a legal personality independent of any government agency or actor?**

Click here to reply

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution has the authority to apply for and receive private funds?**

Click here to reply

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution may not assert a claim of sovereign immunity?**

Click here to reply

## Section 2: Basic Project Information

**Strategic Direction from the CEPF Ecosystem Profile** *(Enter the single strategic direction this proposal aims to address. Use the exact number – Strategic Direction 1, Strategic Direction 2, etc. – and wording from the Ecosystem Profile for this region found on* [*www.cepf.net*](http://www.cepf.net)*.)*

*Enter text here*

**Investment Priorities:***(List one or more investment priorities that this proposal aims to address. Use the exact wording from the Ecosystem Profile.)*

*Enter text here*

**Project Title:***(10 words or less, Please Make Sure to Capitalize All the Major Words of your Title)*

*Enter text here*

## Section 3: Project Location

In every region of investment, CEPF’s grant making is guided by an ecosystem profile that defines conservation priorities at corridor and site scales. If relevant, please identify the country(s), corridor(s), and site(s) where your project will take place. Refer to [www.cepf.net](http://www.cepf.net) and download the ecosystem profile to help identify the specific location of your project.)

|  |  |
| --- | --- |
| **Country(ies):**  Please list country(ies) where project activities will occur. |  |
| **Corridor(s):**  If project activities will occur in one or more corridors. identified in the ecosystem profile, list them here |  |
| **Key Biodiversity Area(s):**  If project activities will occur in one or more KBAs identified in the ecosystem profile, list them here. |  |
| **If your project is not in any of the corridors or KBAs in the ecosystem profile, please describe where it will take place (see note below).** |  |
| **If project activities are in one or more protected areas, please give the name and area (in hectares) of each.** |  |
| **Protected Area Authority, Manager or Owner:** If you propose to work in a specific location or protected area, or multiple locations, describe who is the recognized legal manager of the area or who can claim tenure of the area. This could be, for example, an individual owner; community owners |  |

Note: Please include a link to an appropriate Google Earth map, provide latitude and longitude, or attach a map with your Proposal to provide further clarity about project location.

## Section 4: Project Concept

**Project Rationale** – Describe the conservation need addressed by the project (i.e. key threats and/or important opportunities). Explain what would happen if the project was not implemented.

*Enter Text Here*

**Project Approach** – Describe the proposed strategy and actions of the project in response to the conservation need stated above, including a summary of project objectives, components and key activities, if available at this stage. Describe any potential risks you face in implementing this plan and/or critical factors influencing project achievement.

*Enter Text Here*

|  |  |
| --- | --- |
| **Project Duration** |  |

**Project Impact** – List the anticipated conservation impacts of the project.

*Enter Text Here*

**Link to CEPF Investment Strategy** – *Describe how the project advances the goals of the ecosystem profile. Make reference to the strategic directions, investment priorities and the Logical Framework.*

This program directly links to the following CEPF investment strategies:

*Enter Text Here*

## Section 5: Project Partners and Stakeholders

Please tell us who will be responsible for the success of your project. This includes both individual named people or positions as well as organizations, agencies, or community bodies.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Partners (organizations responsible for implementation of project activities):** | | |
| **Name** | | **Summary of Role on Project** | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | **Stakeholders (other actors that benefit from or influence project outcomes):** | | |
| **Name of Individual or Organization** | | **Summary of Role on Project** | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  |  |

**Long-term Sustainability/Replication** – Describe how project components or results will continue or be replicated after CEPF funding ends.

*Enter Text Here*

**Organizational Strengths:** Provide a brief statement describing **why your organization is best suited** to undertake this project. (For example, your organization has long-standing efforts in the area or was invited by appropriate local stakeholders.)

*Enter Text Here*

## Section 6:  Eligibility and Safeguards

The following questions help CEPF determine the eligibility of your organization or proposed project activities to receive CEPF funds. Where possible, you may revise your strategy to avoid these elements or you may wish to consult the “Resources” section at [www.cepf.net](http://www.cepf.net) that provides links to additional funding sources and resource sites.

#### Safeguard Questions

The following questions help CEPF determine if your project triggers any social or environmental safeguard. CEPF is required to assess all applications to determine if safeguards are triggered, and if so, whether or not appropriate mitigation measures need to be included in project design and implementation. Selecting “yes” to any of the questions below will not necessarily preclude your project from being funded.  For further information on CEPF application of safeguards please refer to <https://www.cepf.net/grants/before-you-apply/safeguards/>. If the answer to one or more of the following questions is marked Yes, please provide detailed information in the respective section marked **Justification I, II, III, IV or V.**

#### Environmental Aspects

Will the proposed project involve activities that are likely to have adverse impacts on the environment?

Click here to reply

Will the proposed project support any physical construction or rehabilitation?

Click here to reply

Will the proposed project support any building of trails?

Click here to reply

Will the proposed project require you or your team to interact with live animals?

Click here to reply

Will the proposed project support any forestry activities?

Click here to reply

***Justification I*** – If the answer to one or more of the above questions is marked Yes, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address environmental issues.

Your justification:

#### Social Aspects

Will the proposed project support activities in an area used or inhabited by Indigenous Peoples?

Click here to reply

Will any proposed impact from the grant negatively affect the livelihoods of Indigenous Peoples either in the area or somewhere else?

Click here to reply

Will the proposed project involve activities that are likely to have adverse impacts on the local community?

Click here to reply

Will the proposed project result in the strengthened management of a protected area?

Click here to reply

Will the proposed project result in reduced or restricted access to the resources in a protected area?

Click here to reply

Will the proposed project result in removal or eviction of anyone from a protected area?

Click here to reply

***Justification II -*** If the answer to one or more of the above questions is marked Yes, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address social issues.

Your justification:

#### Pest Management

Will the project involve use of herbicides, pesticides, insecticides or any other poison?

Click here to reply

Will the proposed project pay for the manufacture, acquisition, transport, application, storage, or disposal of pesticides, including the costs of materials, equipment, and labor?

Click here to reply

Will the proposed project pay for the planning, management, or supervision of work which involves the general use of pesticides or animal control as described in the points above?

Click here to reply

***Justification III -*** If the answer to one or more of the above questions is marked Yes, please provide the name of the pesticide, herbicide, insecticide or poison you intend to use.  In addition, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address pest management issues.

Your justification:

#### Health and Safety

Will the proposed project have any activities that might impact the *health* of project staff or any other people associated with the project in any way?

Click here to reply

Will the proposed project have any activities that might affect the *safety* of project staff or any other people associated with the project in any way?

Click here to reply

***Justification IV –*** If the answer to one or more of the questions above is Yes, please provide an explanation of the potential impacts and how these might be avoided or mitigated.

Your justification:

#### Physical Cultural Resources

Will the project involve the removal or alteration of any physical cultural resources (defined as movable or immovable objects, sites, structures, and natural features and landscapes that have archeological, paleontological, historical, architectural, religious, aesthetic, or other cultural significance)?

Click here to reply

***Justification V –*** If the answer to the question above is Yes, please provide an explanation of the potential impacts and how these might be avoided or mitigated.

Your justification:

## Section 7: Logical framework

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Long-term impacts (3+ years)** | | | | |
| .... | | | | |
| **Short-term impacts (1-3 years)** | | | | |
| .... | | | | |
| **Components** | **1st Quarter** | **2nd Quarter** | **3rd Quarter** | **4th Quarter** |
| **Component 1. ....** | | | | |
| **Output/ Deliverable 1.1.**  .... | .... | .... | .... | .... |
| **Output/ Deliverable 1.2.**  .... | .... | .... | .... | .... |

## Section 8: Budget Summary

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Salaries and Benefits** | | | | | |
| **Name** | **Title** | | | **Amount Requested (US$)** | **Description** |
|  |  | | | $ |  |
|  |  | | | $ |  |
|  |  | | | $ |  |
|  |  | | | $ |  |
| *Line 1: Salaries and benefits sub-total* | | | | $ | $ |
| **Consultancies and Professional Services** | | | | | |
|  |  | | | $ |  |
|  |  | | | $ |  |
|  |  | | | $ |  |
| *Line 2: Consultancies and professional services sub-total* | | | | $ | $ |
| **Furniture and Equipment** | | | | | |
| **Item/Service** | | | | **Amount Requested (US$)** | **Description** |
|  | | | | $ |  |
|  | | | | $ |  |
|  | | | | $ |  |
| *Line 3: Furniture and equipment sub-total* | | | | $ |  |
| **Other Direct Costs** | | | | | |
| Office Rent and Utilities | | | | $ |  |
| Telecommunications | | | | $ |  |
| Postage and Delivery | | | | $ |  |
| Field and Office Supplies | | | | $ |  |
| Maintenance | | | | $ |  |
| Travel | | | | $ |  |
| Meetings and Special Events | | | | $ |  |
| Bank Fees and Insurance | | | | $ |  |
| *Line 4: Other direct costs sub-total* | | | | $ |  |
| **Line 5: Total Direct Costs (Line 1 + 2 + 3 + 4)** | | | | $ |  |
| **Line 6: Management Support Costs** | Percent | % | Dollars | $ |  |
| **Line 7: Total Line 5 (Direct Costs) and Line 6 (Management Support Costs)** | | | | $ |  |

|  |  |  |
| --- | --- | --- |
| **Sub-Grants** | | |
| **Sub-Grantee Organization** | **Amount Requested (US$)** | **Description** |
|  | $ |  |
|  | $ |  |
| *Line 8: Sub-grants sub-total* | $ |  |
| **Line 9: Total amount requested from CEPF (Line 7 + Line 8)** |  |  |
| **Counterpart Funding** | | |
| **Source of Funds** | **Total Funds (US$)** | **Description** |
|  | $ |  |
|  | $ |  |
|  | $ |  |
| *Line 10: Counterpart funding sub-total* | $ |  |
| **In-Kind Contributions** | | |
| **Description of Contribution** | **Total Funds (US$)** |  |
|  | $ |  |
|  | $ |  |
|  | $ |  |
| *Line 11: In-kind contribution sub-total* | $ |  |
| **Line 12: Total Project Budget (Line 9 + Line 10 +Line 11)** | $ |  |