



TRACE FOUNDATION

EXTERNAL GRANTS PROPOSAL FOR RESEARCH APPLICATION FORM

This form should be used for any request of funding for research activities, excluding degree-related research. Please complete this form either electronically or by hand. You also need to fill in Trace Foundation's Budget Form and submit it with this proposal form. Add any documents about your organization and the project that you deem necessary. Please mail, fax or email your completed form to the relevant Trace Foundation Office.

Proposal Reference Number (Official use):	
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SECTION A: BASIC INFORMATION

A1. Individual or institutional/organizational application (Choose and mark with √)

Individual application:	<input type="checkbox"/>	Institutional/organizational application:	<input type="checkbox"/>
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A2. Name of individual applicant and institution/organization

	English or Pinyin	Tibetan	Chinese
a) Person name of individual applicant or representative of institution/organization (Please write according to your government issued ID)			
b) Title of Representative of institution / organization			
c) Name of Institution/organization (only if the applicant is an institution/organization)			

A3. Contact information of individual applicant or representative of institution/organization (refer A2.a)

Mailing address in English (include postal code):	Mailing address in Chinese (include postal code):	Phone 1:
		Phone 2:
		Fax:
		e-Mail:

A4. Proposal information

a) Proposed Research Project Title	
b) Proposal implementation location (including all administrative levels)	
c) Research project Summary	

A5. Implementation period

a) Project starting date (yyyy/mm/dd)	b) Duration (months)	c) Anticipated Completion (yyyy/mm/dd)	Date

A6. Beneficiary summary (summary of section B.6)

a) Number of Direct beneficiaries and who they are	
b) Number of Indirect beneficiaries and who they are	

A7. Proposed Budget and type of currency (choose and mark with √, if “Other” name the currency). Must match exactly with the Trace Foundation budget form.

CNY		USD		HKD		EUR		Other	
a) Amount requested from Trace Foundation			b) Amount of local contribution			c) Total cost of proposal (a + b)			

A8. Other contributions

Have you received or requested support from other organizations or institutions? (Choose and mark with √)	Yes		No	
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If yes, from whom and how much have you been promised or have you received?

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A9. Previous grant applications to Trace Foundation

Have you or your institution applied to Trace Foundation before (Grants, Scholarship or others)? (Choose and mark with √)	Yes		No	
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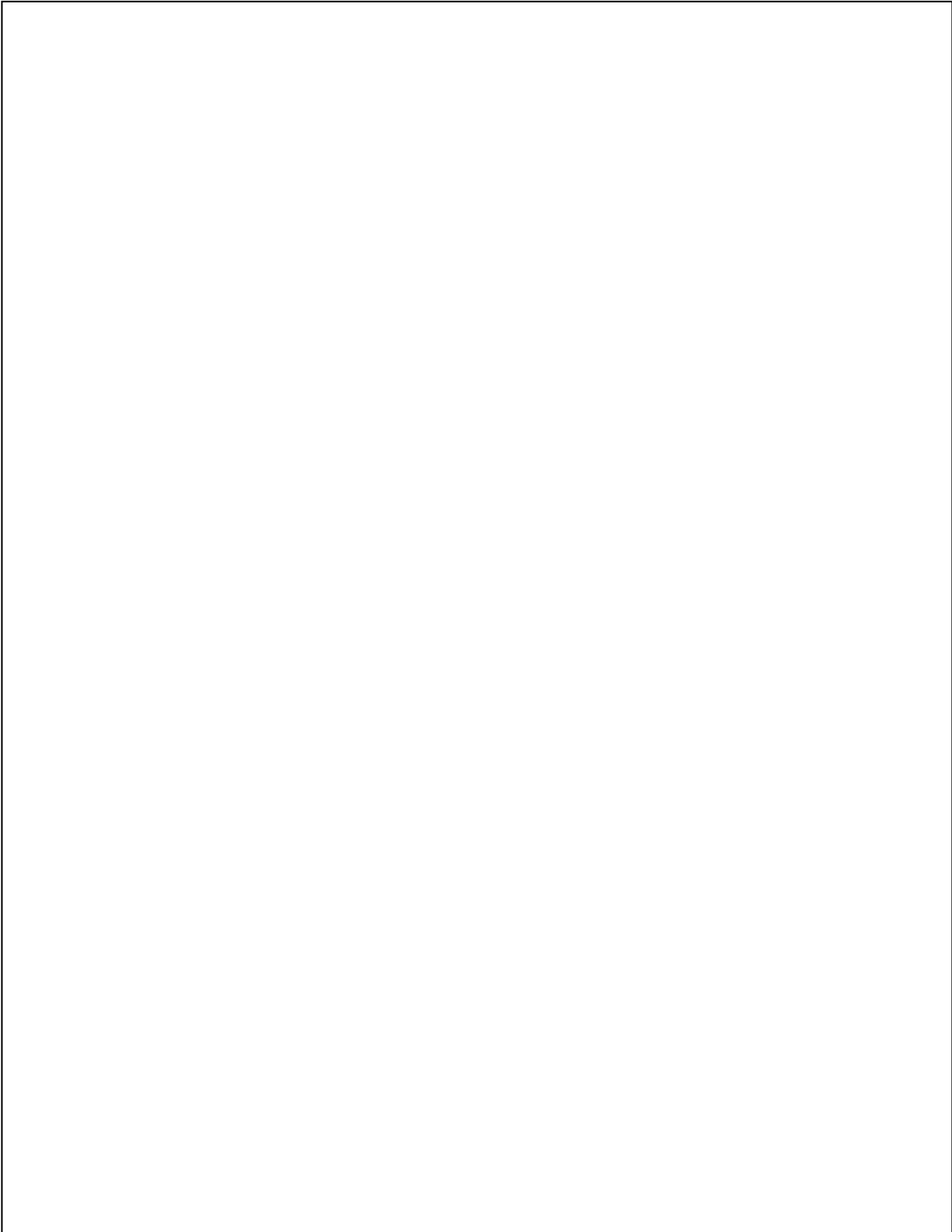
If yes, please fill-in the table below (add lines as required):

Proposal Reference Number	Proposal name	Approved/Declined	Grant amount if approved

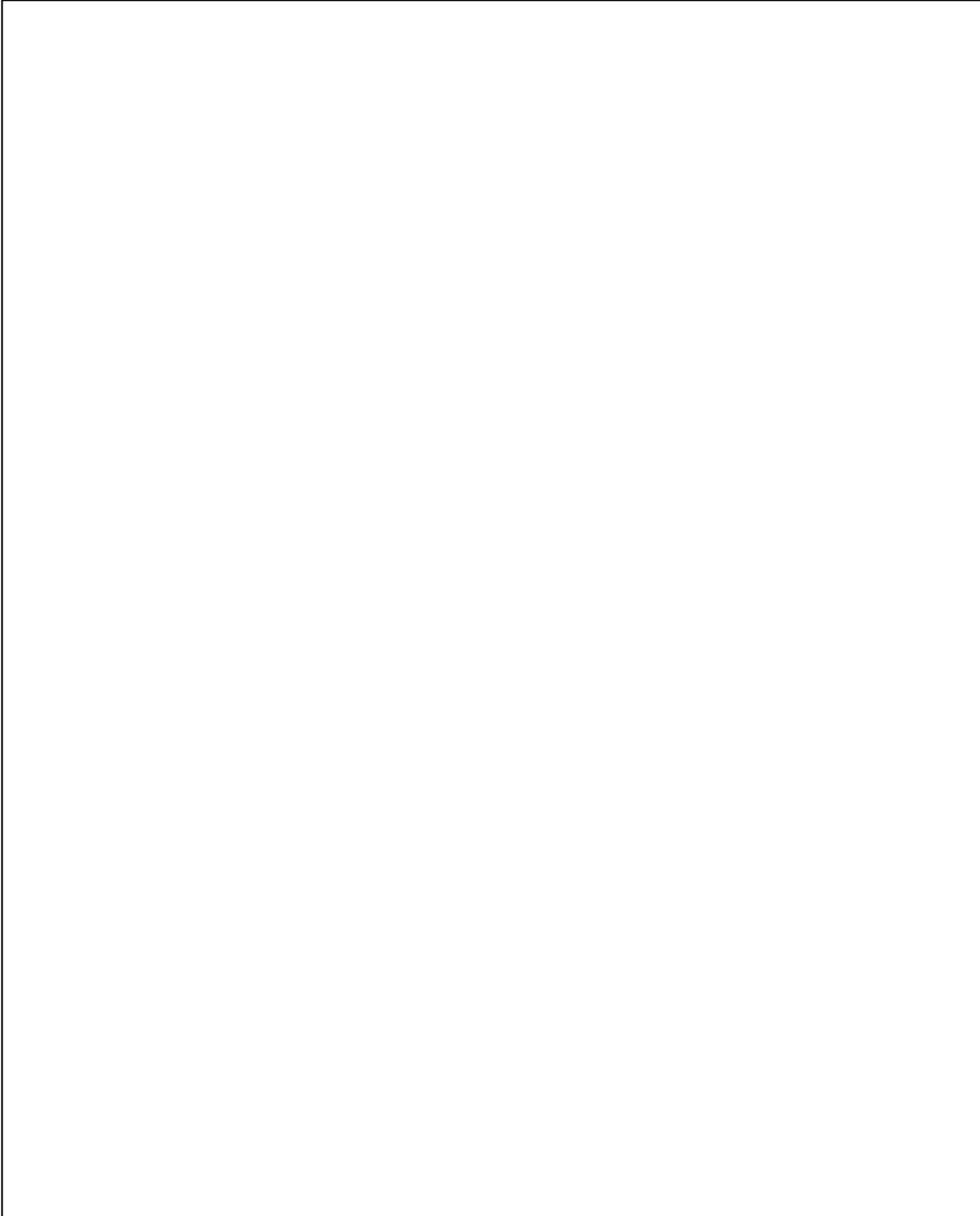
SECTION B: PROJECT DETAILS**B1. Research Basic Information**

Proposed Research Project Title:	
Academic Disciplines [<i>What are the academic disciplines relevant to the project? E.g. History, literature, anthropology, education, etc.</i>]	
Keyword(s) for the project [<i>Not more than 6 words. E.g. Nomads, wool, trading, etc.</i>]	
Institutional affiliations (if any)	
Overall objective	
Specific objective	
Expected results	

B2. Abstract of research [*Briefly summarize your research in less than 1 page*]

A large empty rectangular box intended for writing the abstract. The box is defined by a thin black border. On the right side of the box, there is a small horizontal line extending outwards, approximately halfway down the height of the box.

B3. Statement of Purpose [Explain your long-term academic/career plans and how this research grant will help you achieve them.]

A large, empty rectangular box with a thin black border, intended for the applicant to write their Statement of Purpose. The box is currently blank.

B4. Research Proposal Details: [Please submit a 2-4 page description of the proposed research project. Be sure to include the following sections:]

- 1) A brief summary of your research project, its goals and objectives, and explain why it is relevant to Trace Foundation's work;
- 2) A detailed description of your current and proposed research, including your methodology and activity plans;
- 3) Indicate the necessary travel to archives, libraries, and museums or for other objectives, which are needed for the compilation of the research;
- 4) Selected Biography [*Indicate the published works that your research is based on or most influenced by.*]
- 5) A detailed description of plans for usage of research results, such as publications, teaching courses, etc. Also describe plans for dissemination of research results.

B5. Activities

Result 1:

Activity description	Starting date	Closing date	Activity Costs
Activity 1:			
Activity 2:			
Activity 3:			
Activity 4:			
Activity 5:			
Total Costs			

Result 2:

Activity description	Starting date	Closing date	Activity Costs
Activity 1:			
Activity 2:			
Activity 3:			
Activity 4:			
Activity 5:			
Total Costs			

Result 3:

Activity description	Starting date	Closing date	Activity Costs
Activity 1:			

Activity 2:			
Activity 3:			
Activity 4:			
Activity 5:			
Total Costs			

Result 4:

Activity description	Starting date	Closing date	Activity Costs
Activity 1:			
Activity 2:			
Activity 3:			
Activity 4:			
Activity 5:			
Total Costs			

B6. Research Collaboration Is there/ will there be collaboration with other scholars or research institutions? Yes__ No __

B5a. If yes, please provide following information.

Name of Institution or Scholars	Affiliation	Nature of Collaboration	Note

B7. Beneficiary or targeted audience information

a) Direct beneficiaries

Description of direct beneficiaries	Total number of persons	Male	Female	Number of households (if applicable)

b) Indirect beneficiaries

Description of indirect beneficiaries	Total number of persons	Male	Female	Number of households (if applicable)

c) Additional information regarding institutional beneficiaries

List name of institutions which will benefit from this grant	Type of Institution (Clinic, hospital, school, monastery, government bureau, publishing house etc.)	How will the institution benefit from this grant?

B8. Research Implementation schedule:
Year 1

Result 1:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 2:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 3:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 4:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													

Year 2

Result 1:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 2:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 3:	Month no.												

Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 4:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													

Year 3

Result 1:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 2:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 3:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													
3:													
4:													
5:													
Result 4:	Month no.												
Activity description	1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
1:													
2:													

B9. Partner organizations/Local counterparts

Name of organization	Describe their role	Brief Description of the organization

B10. Government approval

Do you have approval from relevant government bureaus to carry out this project?

(Choose and mark with ✓)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

If yes, please provide copies of the relevant agreement and/or letter of approval

B11. Sustainability of the Project

Please address these questions if applicable:

- How long will the benefits of the project last?
- If applicable, will the beneficiaries be able to continue the training, project activities etc after your intervention completed?
- Would you be able to maintain and support the costs of equipment maintenance without Trace’s support in the future?
- How long do you expect the equipment to last?
- Would you be able to continue the activities of the project once Trace support ends? If yes, please describe how you would do so?
- Please indicate your ability to continue to financially support the project and also to maintain the project activities.
- How do you plan to raise future funding, if needed?
- How do you plan to raise support from relevant stakeholders?

B 12. Supporting Documentation Please attach supporting documentation and submit with the grant application. Please list below all attachments.

1. CV (must include list of publications)
2. Copy of official diploma/academic certificate;
3. 2-4 page research proposal details;
4. Two letters of recommendation from the references provided above.

5. Trace Foundation Budget Form: Please attach Detailed budget that includes a breakdown of your expenses;

Type of Document	Description of Document	# pages

SECTION C: BACKGROUND OF APPLICANTS

C1. Individual applicants only

Name	Gender	Country of citizenship	Ethnic group/Nationality

Educational Background:			
School Level	Period	Institution	Degree (provide governmental certified document on request)
Secondary School			
Vocational			
Undergraduate			
Graduate			
Other			
Current Academic Institutional Affiliation (if applicable)			
School/Department		Program	
Primary Discipline	Secondary Discipline	Expected Date of Completion	

Work experience (including current occupation starting from most recent)			
Period	Institution	Position	Duties

C2. References (Individual applicants only)

Please provide two references (one should be from a recent employer and one should be from village leader, county official etc. where project takes place)

	Reference 1	Reference 2
Name		
Position / Title		
Institution / Work Unit		
Address		
Telephone		
Email		

C3. Applicant's management and project implementation experience (both individual and institutional applicants)

1. Based on your background and experience, please explain the skills and knowledge that you have that would contribute to the successful implementation of the project?
2. Please include details of past projects that you have worked on that would be relevant to the work of the project.
3. Please provide information regarding any prior projects in which you were involved. (a few line description of prior project management / implementation skills with details of name/type of project, duration and location)



C4. Institutional applicants only

Brief introduction of applicant: Please provide the following information when applicable:

1.Name of Founder:	
2. Name and position of Representative:	
3. Mission:	
4. Years in service:	
5. Number of staff:	
6. Sector of Activities:	
7.Project areas:	
8. Annual operating budget:	

9. Annual Report: If your organization is publishing Annual Report, please submit a copy along the application.

10. If organization is based in the United States, please indicate if it is a 501(c) (3) organization?
(Choose and mark with √)

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

11. Website address:

11. Website address:	
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C5. How did you hear about Trace Foundation (TF)?

(Choose and mark with √)

Annual Report	<input type="checkbox"/>	TF Newsletter	<input type="checkbox"/>	TF website	<input type="checkbox"/>
Internet	<input type="checkbox"/>	Friends/colleagues	<input type="checkbox"/>	From TF Grantee	<input type="checkbox"/>

Others (Please specify): _____

D. APPLICATION CHECK LIST

Please be sure to submit the following materials:

1. A completed application form
2. CV (must include list of publications)
3. Copy of official diploma/academic certificate;
4. 2-4 page research proposal details;
5. Two letters of recommendation from the references provided above.
6. Trace Foundation Budget Form: Please attach Detailed budget that includes a breakdown of your expenses;

Please send your proposal to grants@trace.org or fax at 86-28-8515 9287. Please visit our website for further contact information.

Thank you!