



National Olympic Committee

IMPORTANT: In order for this request to be taken into consideration, this form, duly completed and signed, should be sent to Olympic Solidarity *in electronic format*, at the very latest two (2) months prior to the start of the project.

GENERAL INFORMATION

Title of the seminar: Click here to enter title

Start date: Select a date

End date: Select a date

Location: Click here to enter location

Scale (e.g. local, national, etc.): Click here to enter scale

PROJECT DESCRIPTION AND CONTEXT

Please use the tick boxes below to indicate what type of project you are planning.

You may choose more than one category

Develop a project aimed at supporting talented women:	
• Leadership training	<input type="checkbox"/>
• Networking sessions	<input type="checkbox"/>
• Mentoring programme	<input type="checkbox"/>
• Monitoring of women on boards and top management positions	<input type="checkbox"/>
Awareness campaign aimed at enhancing gender equality and diversity in sports	<input type="checkbox"/>
Research in the area of gender equality and diversity	<input type="checkbox"/>
Development of resources in the area of gender equality and diversity	<input type="checkbox"/>
Other: <i>Please add rows as needed</i>	<input type="checkbox"/>

Please briefly describe your project, its different steps and time frame:

Do you already have a strategic plan in this area?
If so, please attach it unless you have already sent it to Olympic Solidarity within the 2017-2020 plan.

Yes

No

How is the project related to your NOC's priorities/objectives in this field?



OUTREACH

How many people do you expect to benefit from the project directly?

	Men	Women	Total
Sporting community			
School children / university students			
General public			
People with disabilities			
Socially vulnerable groups			
Other: <i>Please add rows as needed</i>			
TOTAL			

How many people do you expect to benefit from the project indirectly (optional)?

Indirect Beneficiaries: Indirect beneficiaries are people who benefit as a result of improvements made to the direct beneficiaries, e.g. because of knowledge transfer.

PARTNERS

Will the project be delivered in collaboration with other organisations?

If so, indicate which ones in the table below:

Yes

No

Organisation	How many? (e.g. 5 NFs)	Which ones? (e.g. athletics federation)	Role of partner organisations
National Federations			
National Paralympic Committee			
National Olympic Academy			
International organisations			
Non-governmental organisations			
Governmental organisations			
Private sector, e.g. sponsors			
Other: <i>Please add rows as needed</i>			
TOTAL			



Will current or former athletes or your Athletes' Commission take an active role in the delivery of this project, e.g. as role models? <i>If so, what will their role in the project be:</i>	<input type="radio"/> Yes <input type="radio"/> No

CONTENT

If you are organising an awareness campaign or an educational activity, please indicate below what topics will be covered:

You may choose more than one topic

Importance of gender equality and diversity in sport	<input type="checkbox"/>
Prevention of gender-based discrimination in sport	<input type="checkbox"/>
Prevention of other forms of discrimination, e.g. based on social origin, ethnicity, religion, sexual orientation, language, etc.	<input type="checkbox"/>
Prevention of bullying, harassment and abuse in sport	<input type="checkbox"/>
Promotion and empowerment of female leaders	<input type="checkbox"/>
Media coverage of female athletes	<input type="checkbox"/>
Management of gender equality and diversity programmes and events	<input type="checkbox"/>
Role and action of NOCs, NFs and other stakeholders in this area	<input type="checkbox"/>
Other: ... <i>Please add rows as needed</i>	<input type="checkbox"/>

If you plan to develop new content as part of this project, please indicate the topic(s) and form(s) of the new content in the field below:

Topic	Book	Booklet	App	Video	Website	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



DEFINING AND MEASURING OUTCOMES

Please define the expected short-term outcome(s) of the project:

When and how do you intend to measure if the short-term outcome(s) defined above has/have been achieved?

Please define the expected long-term outcome(s) of the project:

When and how do you intend to measure if the long-term outcome(s) defined above has/have been achieved?

OTHER

Do you have other comments about this project that you wish to share with Olympic Solidarity?

BUDGET

Please provide the main points of your NOC's budget

	Budget (Local currency)	Budget (USD)
Budget requested from Olympic Solidarity <i>(must be the same figure as the total in the table below)</i>		
Other sources of funding <i>Please add rows as needed</i>		
TOTAL		

Olympic Solidarity Online Platform
 Gender Equality and Diversity
 Project – Application form



Detailed breakdown of budget requested from Olympic Solidarity <i>Please add rows as needed</i> <i>Please provide budget by year if project planned over several years</i>	Budget (Local currency)	Budget (USD)
TOTAL		

ADVANCE PAYMENT

Request for 75% advance payment	<input type="checkbox"/>
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ATTACHMENTS

Strategic plan/policy in this area unless already submitted within the 2017-2020 plan	<input type="checkbox"/>
Other documents – Please specify: <ul style="list-style-type: none"> • ... • ... • ... 	<input type="checkbox"/>

REPORTING

Upon the conclusion of the project, you will be asked to complete technical and financial reports and send complementary documentation deemed relevant – e.g. photos and/or videos from events, material developed as part of the project, etc.

I, the undersigned, President/Secretary General of the above-mentioned NOC,
 certify that the information provided above is true and accurate.

Name, function (President or Secretary General) and signature: _____ Date: _____