



# Application form Summer projects



bevlogen met hart en handen

Date of application	Name Applicant
<input type="text"/>	<input type="text"/>

Name of organization	Name contactperson 2 (Local)
<input type="text"/>	<input type="text"/>
Date of formation	Target group
<input type="text"/>	<input type="text"/>
Name project	Date start of work vliegende meubelmakers
<input type="text"/>	<input type="text"/>
Location project	Number of volunteers necessary (min/max)
<input type="text"/>	<input type="text"/>
Name contactperson 1 (Netherlands)	Phone number
<input type="text"/>	<input type="text"/>
Phone number	E-mail
<input type="text"/>	<input type="text"/>
E-mail	Skype
<input type="text"/>	<input type="text"/>
Skype	
<input type="text"/>	

**Project**

1. Describe your project

2. What is the objective of your project?

Short term:

Long term:

**3. Why is it important that your project is realized?**

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**4. What is the vision of your project/organization on foreign aid?**

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**5. In which way does your project try to realize its objectives?**

Plan of action / method of working / description of activities that are planned

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**6. What has your project achieved up till now?**

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**7. In which way does your organization work on the continuity of your project for the coming years?**

Think about financing, management, cooperation with local population.

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**8. In which way does your project match with the objectives of VMM?**

Think about the cooperation with the local population, sharing knowledge and cultural exchange.  
What is the specific objective you want to use VMM for?

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**9. What is the specific objective you want to use VMM for?**

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\_\_\_\_\_  
\_\_\_\_\_

Which three furniture can the VMM get started with?

\_\_\_\_\_  
\_\_\_\_\_

**10. Do you work together with other organizations, foundations or projects?**

Are other organizations or foundations involved in your project?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**11. Have you thought about:**

Where can the furniture makers of VMM organize their workplace?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where can VMM buy wood?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Can you guarantee the wood has not been illegally cut?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where can the volunteers eat and sleep? (the sleepingplace is for free)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**12. Name 3 local people who will be trained during the project:**

1. Name:	_____	e-mail:	_____
2. Name:	_____	e-mail:	_____
3. Name:	_____	e-mail:	_____

If you have an annual report of last year we would like to receive it via mail, post or weblink:

Also, we would like to receive 4 to 6 photo's and your logo in a separate attachment *(please do not paste in this document)* via mail, so we can place those on our website if we decide to accept your application.

You mail this application form to [info@vliegendemeubelmakers.nl](mailto:info@vliegendemeubelmakers.nl)

**Timetable project application:**

- **August 15: the final date for a project application for the coming year;**
- **September 15: response whether or not de Vliegende Meubelmakers accepts your project and start of recruiting participants**

Thank you very much for your application!

The board of the foundation Vliegende Meubelmakers