# 嘉定区妇联向社会力量购买妇女儿童家庭服务项目2019年度项目申请书

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| **一、项目基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目名称 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 申请机构 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 登记证书发证机关 | | |  | | | | | | | | 民政注册号 | | | | | | | |  | | | | | | | | |
| 项目落地区域 | | | 街道 社区 | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目周期 | | | （*例：12个月*） | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目受益人数 | | | 直接受益人 | | | |  | | | | | | | | | 间接受益人 | | | | | | |  | | | | |
| 项目受益群体定义 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目总预算 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目领域 | | | □人才服务 □家庭服务 □儿童服务 □帮困服务 □社区服务  □为老服务 □特殊群体服务 □其他服务 | | | | | | | | | | | | | | | | | | | | | | | | |
| **项目概述**（概述项目针对的问题，以及计划通过何种方式达到什么目标。300字以内） | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **二、申请机构详细信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1、申请机构信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 机构基本情况（300字以内） | | | | | 成立时间、地点、业务范围、主要资金来源、机构愿景与使命等： | | | | | | | | | | | | | | | | | | | | | | |
| 执行过的同类项目 | | | | | 项目名称 | | | 起止时间 | | | | | 资助方 | | | | | 资助总额（元） | | | | | | | 备注 | | |
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| 机构负责人信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | | | | |  | | | | | | | 联系电话 | | | | |  | | | | | | | | | | |
| 电子邮箱 | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **2、本项目主要合作机构信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 合作机构  基本情况  （300字以内） | | | | | 成立时间、地点、业务范围、业绩记录： | | | | | | | | | | | | | | | | | | | | | | |
| 合作历史  （200字以内） | | | | | 合作时间、内容和方式： | | | | | | | | | | | | | | | | | | | | | | |
| 合作机构联系人信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | | | | |  | | | | | | | | | 联系电话 | | | | | |  | | | | | | | |
| 电子邮箱 | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **三、项目详细信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1、项目背景** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 需求分析  （500字以内） | | | | 说明项目要解决的问题，并分析其产生的背景和原因，以及问题存在的广泛性。 | | | | | | | | | | | | | | | | | | | | | | | |
| 请着重说明本项目能够针对性的满足服务对象的哪些需求 | | | | | | | | | | | | | | | | | | | | | | | |
| 受益群体描述（400字以内） | | | | 要求清晰界定本项目的服务对象，并提供其数量、基本特征、具体需求或问题状况等信息。 | | | | | | | | | | | | | | | | | | | | | | | |
| 社区接纳程度（300字以内） | | | | 项目实施地所在社区、项目将要服务的人群对项目的接纳或认可程度。 | | | | | | | | | | | | | | | | | | | | | | | |
| **2、项目方案** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目目标  （50字以内） | | 预计通过项目实施可达到的具体成效,要求清晰、明确、可实现： | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目实施计划 | | | | | 计划开展的活动 | | | | | | | | | | | | | | | | | | | | | | |
| 活动时间 | | | 活动安排 | | | | | | | | | | | | | | | | | | | |
| （*例：第一个月；第一个月至第三个月*） | | | 子项一：\*\*\*\*  活动内容：  活动目的：  活动形式：  活动地点：  参与人员及人数/每次（服务对象、志愿者、社工、专家等）：  活动次数： | | | | | | | | | | | | | | | | | | | |
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| 风险分析及应对预案（400字以内） | | | | | 分析项目执行中可能遇到的风险： | | | | | | | | | | | | | | | | | | | | | | |
| 针对可能遇到的风险而采取的应对措施： | | | | | | | | | | | | | | | | | | | | | | |
| 项目创新性（300字以内） | | | | | 分析本项目与同类项目的差异性及本项目的独特性： | | | | | | | | | | | | | | | | | | | | | | |
| 项目可持续性（300字以内） | | | | | 分析本项目是否可能形成有效的、持续运作的模式；以及创投支持结束后，项目争取到其他社会资源支持、继续实施的可能性。 | | | | | | | | | | | | | | | | | | | | | | |
| **3、项目团队介绍** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目负责人信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | | | |  | | | | | | | 性别 | | | | |  | | | | | 年龄 | | | | |  |
| 职务 | | | | |  | | | | | | | 学历及专业 | | | | |  | | | | | | | | | | |
| 办公电话 | | | | |  | | | | | | | 移动电话 | | | | |  | | | | | | | | | | |
| 邮箱 | | | | |  | | | | | | | 专业资质 | | | | |  | | | | | | | | | | |
| 实施同类项目的经历（200字以内） | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 机构内部参与本项目团队的成员信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | | | | | 性别 | 年龄 | | | 学历及专业 | | | | | | | | 项目分工 | | | | | | | 联系电话 | | | |
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| 外部支持团队信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | | | | | 性别 | 年龄 | | | 学历及专业 | | | | | | | | 专业资质 | | | | | | | 项目分工 | | | |
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| 项目沟通机制（300字以内） | | | | | 项目团队将建立何种沟通机制以保证项目的实施。 | | | | | | | | | | | | | | | | | | | | | | |
| **4、项目预算** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目分目标 | 项目实施内容 | | | | | 使用明细 | | | | 单价（含计量单位） | | | | | 数量 | | | | | | 金额 | | | | | 备注 | |
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| **小 计** | | | | | |  | | | | | | | | | | | | | | | | | | | |  | |
| **管理费** | | | | | |  | | | | | | | | | | | | | | | | | | | |  | |
| **税 金** | | | | | |  | | | | | | | | | | | | | | | | | | | |  | |
| **总 计** | | | | | |  | | | | | | | | | | | | | | | | | | | |  | |