附件2：

成都市慈善总会

2023年阳光蓓蕾特殊儿童家长喘息服务站项目申请书

项目名称：成都市慈善总会阳光蓓蕾特殊儿童家长喘息服务站（盖章）

申请机构：

项目负责人：

年 　月　 日

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| **一、项目基本信息** | | | | | | |
| **项目名称** | |  | | **项目周期** | |  |
| **项目实施地点** | |  | | | | |
| **项目服务对象** | |  | | **项目受益人数** | |  |
| **项目领域** | |  | | **项目总预算**  **（人民币：元）** | |  |
| **申请机构名称** | |  | | **民政注册号** | |  |
| **项目概述（项目将通过何种方式帮助特殊儿童家长得到喘息服务？）** | | | | | | |
|  | | | | | | |
| **项目负责人信息** | | | | | | |
| 姓名及职务 |  | | 电子邮件 | |  | |
| 办公电话 |  | | 手 机 | |  | |
| 机构地址 |  | | | | | |

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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** | |  | | | | | | | | | | | | | | | | | | |
| **机构负责人信息** | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | |  | | | | | | | | | 联系电话 | | | |  | | | | | |
| 电子邮箱 | |  | | | | | | | | | | | | | | | | | | |
| **2、主要合作机构信息和志愿者资源** | | | | | | | | | | | | | | | | | | | | |
| **合作机构**  **基本情况** | | 成立时间、地点、业务范围、业绩记录（300字以内） | | | | | | | | | | | | | | | | | | |
| **合作历史** | | 合作时间、内容和方式（200字以内） | | | | | | | | | | | | | | | | | | |
| **合作机构、志愿者团队联系人信息** | | | | | | | | | | | | | | | | | | | | |
| 姓名及职务 | |  | | | 联系电话 | | | | | |  | | | | 电子邮箱 | | | |  | |
| 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** | | **项目要解决的社会问题是什么？问题产生的原因是什么？为什么有必要解决？** | | | | | | | | | | | | | | | | | | |
| **受益人描述** | | **要求清晰界定本项目的受益人（服务对象）以及要满足他们什么样的需求，并提供其数量、基本特征等信息。** | | | | | | | | | | | | | | | | | | |
| **2、项目方案** | | | | | | | | | | | | | | | | | | | | |
| **项目目标** | | **项目要达成什么样的目标，给受益人（服务对象）带来什么样的改变？如态度、认知、行为等方面的改变。要求：目标具体可衡量、可实现。** | | | | | | | | | | | | | | | | | | |
|  | |  | | | | **项目实施后期望取得的具体成果,要求清晰、明确、可实现、 可衡量。** | | | | | | | | | | | | | | |
| **项目目标** | | 具体目标１ | | | |  | | | | | | | | | | | | | | |
| 具体目标２ | | | |  | | | | | | | | | | | | | | |
| 具体目标… | | | |  | | | | | | | | | | | | | | |
| **衡量项目具体目标达成的评估指标（从哪些方面考察项目目标得以实现？主要为可量化的、具体的指标）** | | | | | | | | | | | | | | | | | | | | |
| **对应具体目标的评估指标/关键词** | | | | | | | **实施后预计该指标达到的水平（可量化的、具体的）** | | | | | | **信息/ 资料来源 (什么样的信息或资料能证明该指标得以实现?出处)** | | | | | | | |
| 目标１： | | | | | | |  | | | | | |  | | | | | | | |
| 目标２： | | | | | | |  | | | | | |  | | | | | | | |
| 目标… | | | | | | |  | | | | | |  | | | | | | | |
| **项目实施计划 （为满足需求，实现项目目标，计划开展的活动和服务）** | | | | | | | | | | | | | | | | | | | | |
| **对应目标** | **活动(服务)名称** | | | | | | | **活动时间** | | **活动内容、形式** | | | | **参与人数** | | | **活动地点** | | | **备注** |
| **具体目标1：** | 活动1 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动2 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动… | | | | | | |  | |  | | | |  | | |  | | |  |
| **具体目标2：** | 活动1 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动2 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动… | | | | | | |  | |  | | | |  | | |  | | |  |
| **具体目标…** | 活动1 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动2 | | | | | | |  | |  | | | |  | | |  | | |  |
| 活动… | | | | | | |  | |  | | | |  | | |  | | |  |
| **项 目**  **产 出** | | **包括：宣传传播产出、活动产出、成果产出等，具体量化。**  如：服务xx人，累计服务xxxx人次，其中：  社交游戏X场，课件X个，服务X人次  社会融合活动X场，服务X人次  … | | | | | | | | | | | | | | | | | | |
| **项目成效** | | **要求：服务对象的具体改变，包括态度、认知、行为等方面的改变。** | | | | | | | | | | | | | | | | | | |
| **社会效应** | | **项目带来的除服务对象的影响。** | | | | | | | | | | | | | | | | | | |
| **风险分析及应对预案** | | **分析项目执行中可能遇到的风险及如何应对。** | | | | | | | | | | | | | | | | | | |
| **可持续性** | | **分析本项目在资助期结束后持续运作的可能性。** | | | | | | | | | | | | | | | | | | |
| **3、项目团队介绍** | | | | | | | | | | | | | | | | | | | | |
| 项目第一负责人信息 | | | | | | | | | | | | | | | | | | | | |
| 姓名 | |  | | | 性别 | | | | | |  | | | | | 联系电话 | | |  | |
| 职务 | |  | | | 学历及专业 | | | | | |  | | | | | 专业资质 | | |  | |
| 项目第二负责人信息 | | | | | | | | | | | | | | | | | | | | |
| 姓名 | |  | | | 性别 | | | | | |  | | | | | 联系电话 | | |  | |
| 职务 | |  | | | 学历及专业 | | | | | |  | | | | | 专业资质 | | |  | |
| **机构内部参与本项目的其他团队成员信息** | | | | | | | | | | | | | | | | | | | | |
| 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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| …… | |  | | |  | | | |  | | | | | |  | | | |  | |
| **项目沟通机制** | | | 项目团队将建立何种沟通机制以保证项目的实施。 | | | | | | | | | | | | | | | | | |
| **4、项目经费预算** | | | | | | | | | | | | | | | | | | | | |
| 类别 | | | | 项目名称 | | | | | | | | 金额（万元） | | | | | | 备注（明细） | | |
| 项目执行费 | | | |  | | | | | | | |  | | | | | |  | | |
| 项目管理费 | | | |  | | | | | | | |  | | | | | |  | | |
| …… | | | |  | | | | | | | |  | | | | | |  | | |
| **合 计：** | | | | | | | | | | | | | | | | | | | | |