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| Date Rec’d |  | Appl. No. | Conserv(1)-- |

**Suntory Fund for Bird Conservation**

**Category: Bird Conservation Groups Activities Grant Category**

**For Global Application Scheme**

**Grant Application**

To Representative Trustee Sumitomo Mitsui Trust Bank Limited:

Our organization applies as follows for a grant from the Suntory Fund for Bird Conservation.  
With regard to personal information such as the names and address provided in this document, I agree to allow disclosure of this information to the Fund’s Steering Committee, etc., as well as to the Trust administrator and the competent government agencies.  
I (in the case of a corporation, this will include corporate officers, etc.) also agree to the content of the section “Declaration of No Present or Future Involvement with Antisocial Forces.”  
Finally, I agree to the announcement of the recipient’s name, affiliation, business details, achievements, etc. if this grant application is successful.

**[Caution] This application form is exclusively for the "Global Application Scheme for Activity Grants to Bird Conservation Organizations".**

2024/mm/dd

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Organization | Organization  name |  | | | | | | | | |
| Website URL: | | | | | | | | |
| E-MAIL: | | | | | | | | |
| Date organization began its activities | yyyy/mm | | | | Number of members | | |  | |
| Organization  address | Address: Tel: ( )  Executive officer contact (name): Exec. officer contact E-MAIL: | | | | | | | | |
| Representative  name | (Date of Birth: YYYY/ MM/ DD) | | | | | | | | |
| Representative’s home address | Rep. E-MAIL Tel: ( ) | | | | | | | | |
| Proxy Organization | Organization  name |  | | | | | | | | |
| Website URL: | | | | | | | | |
| E-MAIL: | | | | | | | | |
| Organization  address | Address: Tel: ( )  Executive officer contact (name): Exec. officer contact E-MAIL: | | | | | | | | |
| Representative  name | (Date of Birth: YYYY/ MM/ DD) | | | | | | | | |
| Representative’s home address | Rep. E-MAIL Tel: ( ) | | | | | | | | |
| **The results for the grant application and other communication will be sent to the organization at the proxy organization address.** | | | | | | | | | | |
| **Note: The planned total amount of grant funding available for bird conservation activities is 20 million yen, with individual grants valued between 200,000 yen and 3 million yen. For outstanding conservation activities, grants can be renewed in principle for up to 3 years.** | | | | | | | | | | |
| Examination seal  Bank use  》 |  | Registration seal | |  | Shiba76 | | 1/7 | |

**Important: Documents to be attached**

The following must be attached to this application.

1. Income and expenditure plan for the grant (for cases where the applicant provides them)
2. Progress report on grant activities (for applicants who wish to continue their grant)
3. Materials that give an overview of the applying organization, including the articles of incorporation, regulations and rules of management.
4. A business report and income and expenditure statement for each of the last two terms.
5. The current year’s business plan and income and expenditure budget.

To the person in charge of the proxy application organization

Information about the Group outside Japan (Applicant Organization) That Will Do the Conservation Activities

1. Please indicate the information about the group that your organization is serving as a proxy for. Fill in this information only if you have reached an agreement with the overseas organization. (That is, do not submit the information if your organization is still in the discussion stages with the overseas organization.)
2. The overseas organization must be a legal personality or a volunteer group that has built the same degree of social trust for its activities as a legal personality.
3. The information on this page is for one group. If conservation activities will be done by several groups, copy this page and fill out one page for each group, then submit the pages as a WORD or PDF file.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Theme of activities |  | | Name of bird | (Write “wild bird” if there is no particular target bird species) |
| Area where activities will take place (prefecture/place name) |  | | | |
| Amount of grant desired | thousand yen | Of the application amount listed on the left  Desired amount and percentage of representative applicant organization | | The upper limit is 40%  **＊**  thousand yen\*/ 　　％ |
| Grant activity period | (indicate as year/month) to | | | |
| Purpose and overview of applying organization’s activities | (The description must fit within this space. The information on this page will be used for Bank use below.) | | | |
| Recommending organization | Name of recommending organization: | | | |
| Previous history of grants from this Fund | □ 3 years ago □ 2 years ago □ Last year □ First application (Check the appropriate answer) | | | |

**＊(Note) If the determined subsidy amount is different from the application amount, the breakdown of the subsidy will be the amount calculated by multiplying the determined subsidy amount by the distribution ratio stated in this column. (in thousands of yen)**

**Activity Plan and Budget Plan for This Funding Year of the Applicant Organization**

1. Grant Applicant’s Activity Plan (period, concrete plans, etc.)

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| --- |
| Grant Applicant’s Activity Plan |
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1. Income (indicate all sources of income for the planned activities the grant will be used for)

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Description | Budgeted amount (thousand yen) | Notes |
| 1. This grant   **\*Please enter the amount listed on the previous page.** | Applicant Organization |  |  |
| Proxy Organization | **＊** |
| (2) Other grants |  |  |  |
| (3) Member and participation fees | Member fees, participation fees, etc. |  |  |
| (4) Other |  |  |  |
| Total Annual Income (A)  Please make sure. （A）＝【3. Expenditures’s Total Expenditures（A）】＋ 【6. Information on Proxy Organization’s Total Expenditure（B）】 | | **thousand yen**  (Of these, the subsidy received by the proxy application organization　　　　　　　　　　　　thousand yen) | |

3. Expenditures (indicate all expenditures for the planned activities the grant will be used for)

※The example Expenditure Items below are only for reference. Please overwrite/revise the examples as needed. Ordinary expenses such as personnel costs, rent and the like are not allowed.

|  |  |  |  |
| --- | --- | --- | --- |
| \* Expenditure items (examples) | | Budgeted amount (thousands of yen) | Details (for multiple research studies, provide details separately for each) |
| Specifics regarding expenditures from this grant money | **Equipment and material costs**  Equipment such as cameras, lenses, PCs, accessories, etc.; materials for building nests, etc. |  | (Enter item, unit price, quantity, etc.) |
| **Travel expenses,** **lecture honorariums, part-time job costs**  Travel expenses (airline tickets, transportation expenses, accommodation expenses, etc.), lecture honorariums, etc. |  | (Enter the unit price, round-trip travel expenses, accommodation expenses, number of days (route), number of users, number of instructors, etc.) |
| **Office consumables**  Office supplies, photocopying costs, photo costs, batteries, etc.) |  | (Enter item, unit price, quantity, etc.) |
| **Postage**  Stamps, postcard costs, etc. |  | (Enter item, unit price, quantity, etc.) |
| **Other office expenses**  Venue fees for events sponsored by the applicant organization, teaching materials, pamphlets printing costs, etc. |  | (Enter item, unit price, quantity, etc.) |
| Total Expenditures (A) | thousand yen |  |

4. Others

|  |  |
| --- | --- |
| Explanation of relationship, etc. with overseas organization | ・Explanation of relationship, etc. with overseas organization  ・If available, a business report, income and expenditure statement or similar materials (optional). |
| Reason to apply for this grant |  |

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| (If applying for a multiple-year grant)  Business plan (maximum of 3 years) |  |

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| Map of area where planned activities will take place (draw or attach a rough map)  Address: |
| Location map |
| Main Achievements, etc. of the Applicant Organization |

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5.Bank Information for Depositing Grant Funding for a Successful Application (Applicant Organization)

|  |  |
| --- | --- |
| **Note**  Incomplete/incorrect information may significantly delay the deposit of grant funds. | |
| **Bank Name** |  |
| **Branch Name** |  |
| **Address(Bank Address)** |  |
| **SWIFT Code(required)** |  |
| **IBAN Code(Europe is required)** |  |
| **Recipient Name(Corporate Account)** |  |
| **Recipient Account Number** |  |
| **Address(Recipient)** |  |

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6. Information on Proxy Organization

|  |  |
| --- | --- |
| Name of Japanese Proxy Organization |  |

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| \* Expenditure items (examples) | | Budgeted amount (thousands of yen) | Details (for multiple research studies, provide details separately for each) |
| Specifics regarding expenditures from this grant money | **[Travel]**  Travel expenses (airline tickets, transportation expenses, accommodation expenses, etc.) |  | (Enter the unit price, round-trip travel expenses, accommodation expenses, number of days (route), number of users, etc.) |
| **[Postage]** |  |  |
| **[Other office expenses]** |  |  |
| Total Expenditure (B) | thousand yen |  |

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| --- | --- | --- | --- | --- | --- |
| **Bank Information for Depositing Grant Funding for a Successful Application** | | | | | |
| Note 1: Incomplete/incorrect information may significantly delay the deposit of grant funds.  Note 2: When using JP Bank as the recipient account, include the 3-digit branch code and the 7-digit account number  Japan Post Bank's "ordinary deposits" are also treated as "ordinary deposits." | | | | | |
| **Bank Name** | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | (Circle one)  Bank  Credit Union  Credit Association  Ag-Coop |  | Branch  Sub-Branch  Business Div. | | | | | |
| **Acct. Type** | Regular | | | **Acct. No.** | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  | |
| **Recipient** | | **Name** | ● One letter or kana character per box, entered from the left.   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | | |
| **Rep. Name** | Note  If the account for the grant payment is a corporate account, the name and title of the representative must be included. Do not omit this information. Please contact the financial organization maintaining the account if this information is unclear.   |  | | --- | |  | | | |

**Declaration of No Present or Future Involvement with Antisocial Forces**

Should it be found that any of the items indicated in 1, 2 or 3 below apply to me (in the case of a corporation, all references to “I/me/myself” here apply to corporate officers, etc.), or that I have taken any action indicated in 3 below, or that I have made a false declaration regarding 1 or 2 below, I will not dissent if the Fund notifies me that it will withdraw the grant award, and I agree to immediately return the full amount of any grants, scholarships etc. received. In addition, I will be responsible for any fees, expenses or damages that result.

1. I declare that I do not fall under any of the “organized crime” (or similar types of group) categories listed in (a)–(f) below and promise that I will also will not fall under any of them in the future.
2. Organized crime group
3. Member of an organized crime group
4. Former member of an organized crime group and less than 5 years have passed since leaving
5. Associate member of an organized crime group
6. A company of an organized crime group
7. Corporate racketeer, political racketeer, or member of a group specialized in intellectual crimes
8. Other persons equivalent to the above
9. I declare that none of the following categories apply to me and promise that I will also will not fall under any of them in the future.
10. Have a relationship with a member of an organized crime (or similar) group who is recognized as controlling an organization’s management.
11. Have a relationship with a member of an organized crime (or similar) group who is recognized as having substantial control of an organization’s management.
12. Have a relationship that is recognized as using a member of an organized crime (or similar) group for the purposes of gaining wrongful profits for myself, my company or a third party, or for the purposes of damaging a third party.
13. Have a relationship with a member of an organized crime (or similar) group that is recognized as me providing funds, etc. or convenience for that person.
14. As an officer or person substantially involved in management of the organization, having a relationship with a member of an organized crime (or similar) group that should be criticized by society.
15. I promise not to perform any of the following acts myself or use a third party to carry out such an act.
16. Violent demands
17. Unreasonable demands that exceed the legal responsibility
18. Acts that threaten or use violence for transactions
19. Disseminate rumors/carry out acts that damage the credibility of the Trust or interfere with the business of the Trust
20. Other acts equivalent to the preceding acts

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【Attachment】

Please fill in if there is an organization that has promised to cooperate with the application project.

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| Organizations other than the applicant organization | | |
| 1 | Organization  name |  |
| Representative  name |  |
| Organization  address |  |
| Contact email |  |
| 2 | Organization  name |  |
| Representative  name |  |
| Organization  address |  |
| Contact email |  |
| 3 | Organization  name |  |
| Representative  name |  |
| Organization  address |  |
| Contact email |  |