

Afya Jijini Program
Request for Applications (RFA)
Afya Jijini Small Grants Program - AJSG Adherence 2018 - 010
Issue Date: January 10, 2018

Dear Applicant:

IMA World Health (hereinafter referred to as “IMA”) is issuing a Request for Applications (RFA) to provide technical support for the Afya Jijini project under USAID Contract No.: AID-615-C-15-00002. Pursuant to the authority of the Foreign Assistance Act of 1961, as amended, the Afya Jijini program is seeking applications from parties interested in implementing grant-funded program activities, based on the terms of references contained herein. The grants will be awarded and implemented in accordance with the United States Agency for International Development (USAID) Advanced Directive System (ADS) 302.3.5.6 and 302.3.4.13, “Grants under Contracts (GUCs).” Any resulting awards will be subject to 2 CFR 200 and 2 CFR 700 as well as the Afya Jijini internal grant management policies. Awards made to Non-U.S. Non-Governmental organizations will be administered in accordance with ADS Chapter 303 and Standard Provisions for Non-U.S. Non-Governmental Organizations. Awards made to U.S. Non-Governmental Organizations will be administered in accordance with ADS Chapter 303, 2 CFR 200 and Standard Provisions for U.S. Non-Governmental Organizations.

The annexes included with this Request for Applications are:

- Annex A – Grant Application Form
- Annex B – Implementation Timeline
- Annex C – Grant Application Budget Forms
- Annex D – Applicant Self-Assessment Form
- Annex E – Required Certifications
- Annex F – Standard Provisions for Solicitations

IMA realizes that Applicants may have additional questions after reading this RFA. Interested Applicants can submit any questions by **January 17, 2018 (5.00 PM)** afyajijinigrants@imaworldhealth.org, according to the Instructions to Applicants, Section G3 of the RFA.

This RFA does not obligate IMA to execute a sub-grant, nor does it commit IMA or the U.S. Government to pay any costs incurred in the preparation and submission of the applications. Furthermore, IMA reserves the right to reject any and all applications, if such action is considered to be in the best interest of IMA. Applications are submitted at the applicant’s risk. All preparation and submission costs are at the applicant’s expense.

Thank you for your interest in the Afya Jijini Small Grants Program (AJSG).

Sincerely,

Dr. Dan Wendo, *Afya Jijini* Chief of Party

A. GOAL AND OBJECTIVES

Afya Jijini is a three-year USAID-funded program designed to strengthen Nairobi County’s institutional and management capacity to deliver quality healthcare services. Afya Jijini’s strategic goal is to “Improve County-level Institutional Capacity and Management of Health Service Delivery” with the purpose of improving and increasing access and utilization of quality health services in focus counties through strengthened service delivery and institutional capacity of health systems. The overall goal of the project is to contribute to CDCS Sub Intermediate Result 2.2.2 “Improved county-level accountability, institutional capacity, leadership, and management of health service delivery.” The project seeks specifically to achieve three main sub-purposes:

- 1. Sub-purpose 1: Increased access and utilization of quality HIV services.**
 - a. Output 1.1: Elimination of Mother-to-Child Transmission (eMTCT)
 - b. Output 1.2: HIV Care and Support Services
 - c. Output 1.3: HIV Treatment Services
 - d. Output 1.4: HIV Prevention, HIV Testing and Counseling (HTC), and Voluntary Medical Male Circumcision (VMMC)
 - e. Output 1.5: Tuberculosis (TB) / HIV Co-infection Services

- 2. Sub-purpose 2: Increased access and uptake of focused maternal, newborn, and child health (MNCH), family planning (FP), Water, Sanitation and Hygiene (WASH), and nutrition services.**
 - a. Output 2.1: Maternal and Newborn Health (MNH) Services
 - b. Output 2.2: Child Health Services
 - c. Output 2.3: Family Planning Services
 - d. Output 2.4: Water, Sanitation and Hygiene (WASH) Services
 - e. Output 2.5: Nutrition Services

- 3. Sub-purpose 3: Strengthened and functional county health systems.**
 - a. Output 3.1: Partnerships for Governance and Strategic Planning
 - b. Output 3.2: Human Resources for Health (HRH)
 - c. Output 3.3: Health Products and Technologies (HPT)
 - d. Output 3.4: Strategic Monitoring and Evaluation Systems
 - e. Output 3.5: Quality Improvement Systems

The activities will build on experiences, successes, and lessons learned from the previous integrated health service delivery activities, including the AIDS, Population and Health Integrated Assistance Plus (APHIAplus) Nairobi/Coast program, Afya Jijini year 1 achievements and ensure coordination and communication among development counterparts. The success of the Afya Jijini project requires work at national, county, sub-county, facility and informal settlement levels, supporting local staff and health facilities to address challenges across technical and management arenas. The project will work with the County Health Management Team (CHMT) and sub-county health teams to better manage, deliver, and report on health services in the devolved context and in compliance with Government of Kenya (GoK) policies.

This Request for Applications (RFA) seeks applicants interested in proposing grant-funded activities to support the above-referenced program goals. Specifically, the program is seeking to fund the following types of activities:

Under **Sub-Purpose 1**, this grant will provide targeted community health services and demand creation for HIV and TB services, including elimination of mother-to-child transmission of HIV (eMTCT), HIV care and support services, HIV treatment services, HIV prevention, HTC and VMMC services, and TB/HIV co-infection services. For this sub purpose, Afya Jijini grants under contract is seeking applicants (Grantees) to bid to provide the following activities:

HIV Adherence RFA

Proposed Detailed Activities should include: Specifically, the program is seeking to fund the activities below in 2018. The grantee shall independently perform all work and furnish all labor, materials, supplies, equipment, and services (except as otherwise specified in the contract) to perform the following services:

- Engage and support TPA counselors to offer and conduct the following activities:
 - Offer initial adherence counseling sessions to newly enrolled clients in the 22 program-supported high-volume facilities
 - Initiate treatment literacy sessions for children, caregivers, adolescents and adults
 - Strengthen referrals/linkages between the facility and community
 - Identify adherence needs in each facility for priority groups, including defaulters, clients newly-initiated onto ART, clients with non-suppressed viral loads, pediatrics, and adolescent patients
 - Identify and link patients with adherence issues to PSSG meetings in 22 high-volume facilities
 - Specify the days of each week/month that will be set aside for clinical appointments of these priority groups to coordinate PSSGs being held on those days
 - Perform group adherence sessions for the different priority groups and document outcomes
 - Perform one-on-one adherence sessions for clients with non-suppressed viral load
 - Provide daily PSSGs for stable clients (non-priority groups)
 - All clients with an appointment that day will be targeted to attend the support group on a first-come first-serve basis, meaning the support group meeting will have specific times, but it can vary from facility to facility
 - Keep proper documentation of PSSG attendance
 - Provide continuous supportive adherence counseling
 - Participate in facility-based quality improvement teams (QITs) meetings
 - Prepare weekly reports per facility on adherence and PSSG attendance

- Participate in monthly review meetings to assess performance and make adjustments
- Participate in monthly facility review meetings to assess performance and make adjustments in line with the expected outcomes and deliverables by both MOH and USAID
- Participate in the project FY19 work planning preparatory meetings and a FY18 work plan review conference

B. PROGRAM DESCRIPTION

I. Title: Afya Jijini Small Grants Program - AJSG Adherence 2018 - 010

II. Intended Duration of Grants: Up to 6 months.

III. Total Funding available: \$85,000. IMA reserves the right to vary the actual value of individual grants provided and to accept any or none of the proposals received.

IV. Intended Range and Maximum Value of Individual Grants: \$15,000 - \$85,000

V. Intended Maximum Number of Grants: 1

VI. Intended Start Date of Grants: April 1, 2018

Detailed Terms of Reference (TOR)/Scopes of Work (SOW)

Background: The need for adherence support is acute within Nairobi City County. At current *Afya Jijini*-supported sites, more than 32,000 clients are currently enrolled within care and treatment. While suppression stands at approximately 81% in adult clients, 65% for adolescents, 70% for pediatrics and 92% among prevention of mother-to-child transmission (PMTCT) clients, increased attention and rigor is needed to achieve 90% viral suppression among adults and children and avoiding loss-to-follow up (LFTU) and failed suppression (and subsequent transition to second-line treatment). Suppression rates are anticipated to increase with advancement of the Test and Treat strategy, increased demand creation for psychosocial support groups (PSSGs), especially for children and vulnerable groups.

Objective: The objective of the grant is to establish and/or support facility-based adherence and PSSGs for PLHIV, with a special emphasis on: clients newly initiated onto ART, clients with non-suppressed viral loads, and pediatric and adolescent patients. This is a facility-based intervention that will be implemented in all 22 *Afya Jijini*-supported high-volume facilities offering PMTCT and care and treatments services in Nairobi City County. The activity will be led by Treatment Preparation and Adherence (TPA) Counselors, clinicians and nurses working at the Comprehensive Care Clinics (CCCs). *Afya Jijini* has already engaged TPA counselors who will be transitioned to the grantee upon award. The grantee will support the day-to-day operation of the TPA counselors.

Geographic Focus:

The aim of this grant is to strengthen PSSGs in 22 high-volume facilities with >500 clients on treatment across all 10 sub-counties reaching 88% of all patients on treatment. Please see annex to RFA 004 for the list of high-volume facilities supported by Afya Jijini.

Target Outcome of Grant Activity:

- > 90% of clients are retained on treatment at 12 months
- > 90% VL of clients on treatment are virally suppressed
- 12,000 new patients , 5,500 non-suppressed patients and 800 adolescents supported for adherence counseling

Proposed detailed activities under this small grant should include: Specifically, the program is seeking to fund the activities below for 6 months in 2018. The grantee shall independently perform all work and furnish all labor, materials, supplies, equipment, and services (except as otherwise specified in the contract) to perform the following services:

- Engage and support TPA counselors to offer and conduct the following activities:
 - Offer initial adherence counseling sessions to newly enrolled clients in the 22 program-supported high-volume facilities
 - Initiate treatment literacy sessions for children, caregivers, adolescents and adults
 - Strengthen referrals/linkages between the facility and community
 - Identify adherence needs in each facility for priority groups, including defaulters, clients newly-initiated onto ART, clients with non-suppressed viral loads, pediatrics, and adolescent patients
 - Identify and link patients with adherence issues to PSSG meetings in 22 high-volume facilities
 - Specify the days of each week/month that will be set aside for clinical appointments of these priority groups to coordinate PSSGs being held on those days
 - Perform group adherence sessions for the different priority groups and document outcomes
 - Perform one-on-one adherence sessions for clients with non-suppressed viral load
 - Provide daily PSSGs for stable clients (non-priority groups)

- All clients with an appointment that day will be targeted to attend the support group on a first-come first-serve basis, meaning the support group meeting will have specific times, but it can vary from facility to facility
- Keep proper documentation of PSSG attendance
 - Provide continuous supportive adherence counseling
 - Participate in facility-based quality improvement teams (QITs) meetings
 - Prepare weekly reports per facility on adherence and PSSG attendance
 - Participate in monthly review meetings to assess performance and make adjustments
- Participate in monthly facility review meetings to assess performance and make adjustments in line with the expected outcomes and deliverables by both MOH and USAID
- Participate in the project FY19 work planning preparatory meetings and a FY18 work plan review conference

Reporting and Monitoring Process:

- Weekly facility reports on PSSG attendance.
- Develop and submit a comprehensive work-plan, detailed Gantt charts, and performance monitoring plan.
- Submit monthly update reports to *Afya Jijini* on the current status of implementation activities that align with the project’s and MOH indicators.
- Submit quarterly reports to *Afya Jijini* that discusses the current status of each activities, the challenges, successes, and anticipated activities for the next quarter.
- Submit a final report to *Afya Jijini* that includes the overall successes of the grant, challenges, lessons learned, and final performance monitoring plan that demonstrates outcomes achieved.

C. EVALUATION CRITERIA

Applications will be evaluated by an internal review panel within Afya Jijini and may include representatives from USAID/Kenya and East Africa.

Applications will be evaluated against the criteria in the table below.

Evaluation Category	Rating - Points
Feasibility of Design & Approach	35

Afya Jijini Program Request for Applications

Impact on Target Group	15
Management & Programmatic Capacity	20
Relevant Work Experience	20
Gender Awareness	10
Total	100

These evaluation criteria elements are described more fully below.

A. Feasibility of Design & Technical Approach. The quality and feasibility of the application in terms of the viability of the proposed technical approach, (i.e., the proposed technical approach can reasonably be expected to produce the intended outcomes), appropriateness of the proposed methodology, innovativeness, and the work plan for achieving project objectives to offer significant impacts on the health sector in Kenya. The technical approach must directly contribute to achieving the relevant expected results listed in the Program Description, above, and must be measurable under one or more of the Afya Jijini indicators. Evaluation of approaches - either proven to be effective or new untried approaches with promise – will be evaluated. Proposed mechanisms for monitoring and evaluation (M&E) with objectively measurable indicators will also be appraised.

B. Impact on Target Group. The extent to which the proposed activity corresponds to the needs of target group(s) and will directly benefit them. Also, the degree to which it will directly or indirectly stimulate other organizations and resources to replicate, develop, or implement activities supporting the objectives of Afya Jijini.

C. Management and Programmatic Capacity. Evidence of the capability of the Applicant to undertake and accomplish the proposed activities. The application should demonstrate the organization's effectiveness in terms of internal structure, technical capacity, and key personnel, in meeting the goals of the proposed project. In addition, the organization must demonstrate adequate financial management capability. The appraisal will be based principally on reference checks by Afya Jijini; the background, qualifications, reputation, appropriateness and skills of its key personnel; and achievements (including development of self-sufficient, sustainable activities) of the organization involved.

D. Relevant Work Experience. Relevant work experience implementing similar activities as outlined in the TOR/SOW. This examines an applicant's proposed activities in terms of how they relate to the TOR/SOW, which is a critical factor in assessing the skills and knowledge of the applicant to implement the activity as described in this RFA.

E. Gender Awareness. The extent to which the funded activity includes a gender component or represents a strong commitment to access and equity of services by gender.

Budget. Proposed budget will not be scored but will be evaluated based on price, reasonableness, allowability and realism.

Final approval of all awards will be made by USAID following completion of pre-award risk assessments to determine that the organization has the capacity to manage grant funds effectively.

D. ELIGIBILITY

D.1 RECIPIENTS

- Applicants that are indigenous local, non-profit non-governmental organizations existing under the laws of the Government of Kenya and are in compliance with all applicable civil and fiscal regulations will be preferred. However, applications from suitable international non-governmental nonprofits domiciled in Kenya will also be considered.
- All applicants must have established outreach capabilities with linkages to the beneficiary group(s) identified in the program description, which is reflected by the incorporation of local views in the proposal
- Applicants must have been established for a minimum of 3 years
- The organization must have a Board of Directors/ Board of Trustees, and five or more full time staff (including program management, finance/administrative, and monitoring and evaluation staff).
- The organization must have a minimum absorptive capacity and demonstrate the potential to acquire sufficient capacity to manage programs in a sustainable manner
- The organization must show proof of having a functional financial system
- Preference will be given to organizations with current offices and operations in program supported sub-counties
- Faith-based and community groups will receive equal opportunity for funding in accordance with the mandated guidelines. Faith-based organizations whose objectives are for discriminatory and inherently religious purposes, and whose main objective of the grant is of an inherently religious nature, are ineligible for funding.
- Applicants must display sound management in the form of financial, administrative, and technical policies and procedures and present a system of internal controls that safeguard assets; protect against fraud, waste, and abuse; and support the achievement of program goals and objectives. Afya Jijini will assess this capability prior to awarding a grant.
- Applicants must sign the required certifications prior to receiving a grant. Afya Jijini will provide the certifications in Annex E and review them with applications.
- All Applicants are required to be registered in the System for Award Management (SAM) and obtain a DUNS number.
- Applicants with little or no experience with USAID funding are encouraged to apply.

The applications that do not meet the eligibility criteria listed above will not be evaluated and will be disqualified.

D.2 INELIGIBLE EXPENSES

Afya Jijini grant funds may not be utilized for the following purposes:

- Construction or infrastructure activities of any kind. More information on what constitutes “construction” can be found at: www.usaid.gov/sites/default/files/documents/1868/303maw.pdf

Afya Jijini Program Request for Applications

- Ceremonies, parties, celebrations, or “representation” expenses
- Purchases of restricted goods, such as: agricultural commodities, motor vehicles, pharmaceuticals, contraceptive products, used equipment; without the prior approval of Afya Jijini.
- Purchase of prohibited goods. Prohibited goods under USAID regulations, include but are not limited to the following: abortion equipment and services, and luxury goods.
- Alcoholic beverages
- Purchases of goods or services restricted or prohibited under the prevailing USAID source/nationality requirements found in ADS 310.
- Please note that the Geo Code for this program is 935. This means any area or country including the recipient country, but excluding any country that is a prohibited source.
- Any purchase or activity, which has already been made.
- Purchases or activities unnecessary to accomplish grant purposes as determined by the Afya Jijini program.
- Prior obligations of and/or, debts, fines, and penalties imposed on the Grantee
- Creation of endowments.

E. FUNDING

All grants will be negotiated, denominated and funded in Kenyan Shillings (KES). Payments will either be made on a reimbursement basis, in tranches corresponding to achievement of agreed upon milestones or, in exceptional cases, on a monthly advance and liquidation basis. The decision will be made by Afya Jijini as part of an eventual analysis of the Applicant’s organizational capability to manage grant funds.

All costs funded by the grant must be allowable, allocable and reasonable per 2 CFR 200 Sub part E – Cost Principles.

Grant applications must be supported by a detailed and realistic budget as described in Section G. Afya Jijini expects to receive applicants’ best financial proposals in terms of compliance with technical aspects of the proposal, allowability, and realism.

F. AUTHORITY/GOVERNING REGULATIONS

Afya Jijini grants will be made under the authority of the Foreign Assistance Act of 1961, as amended; 2 CFR 200 and 2 CFR 700; ADS Chapter 303; ADS 302.3.4.13 and ADS 302.3.5.6; Standard Provisions for U.S. Non-Governmental Organizations; and Standard Provisions for Non - U.S. Non-Governmental Organizations, all of which can be accessed through the USAID website at www.usaid.gov.

Additionally, Afya Jijini grantees will be held to, the administrative requirements and cost principles outlined in 2 CFR 200.

Afya Jijini alerts applicants and grantees that USAID may, at its sole discretion, supersede any decision, act or omission taken by Afya Jijini with respect to any grant. Under the Afya Jijini grant program, USAID retains the right at all times to (1) dictate a different decision with respect to the award or administration of any grant; (2) rectify an omission by Afya Jijini with respect to the award or administration of any grant; 3) take over the administration of any grant awarded hereunder; and/or (4) terminate any grant in whole or in part.

G. INSTRUCTIONS TO APPLICANTS

The applicants will propose their own implementation strategies for the implementation of the scope of work described under Section A: Program Description, introducing innovations that are appropriate to their organizational strengths.

G.1. Applicant Self-Assessment

All applicants are subject to a pre-award risk assessment performed by Afya Jijini, to help ascertain whether the organization has the minimum management capabilities required to handle U.S. government funds. This self-assessment is a first step in the risk assessment process. The Applicant Self-Assessment is contained in Annex D.

G.2. Full Grant Application

Templates for presentation of both the technical and budget aspects of the application are provided in Annex B-C. Applicants shall present their proposals in the formats provided. Those applications that are not submitted according to the formats requested and in accordance with the instruction in this RFA may be considered as non-responsive and may be disqualified.

The application elements and guidelines are summarized below:

- **Section I (Basic Information).** The Applicant provides basic contact information and information regarding the status of the organization.
- **Section II (Project Description).** The Applicant describes overarching program elements such as objective of the grant and the linkage to Afya Jijini objectives, results and indicators for measuring results, the activities' beneficiaries, and plan for disseminating activity deliverables.
- **Section III (Project Implementation Plan).** This section covers information regarding project implementation, including proposed personnel and descriptions about each task. Each task must be:
 - Complete and sound
 - Integrated and scheduled with dependent tasks
 - Assigned to a responsible party
 - Defined in terms of resources required
 - Concluded with a viable milestone of achievement—milestones must be linked to results.

The tasks listed must show a logical, thoughtful approach to the overall implementation plan. Tasks should describe actions and be logically sequenced. Each task must contribute to the achievement of the activity objective.

Applicant describes any relevant material assumptions made and/or conditions precedent required for the achievement of the grant objective.

The implementation plans must be supported by a bar chart that shows all identified tasks over the duration of the activity.

- **Section IV (Experience and Capacity).** Applicant describes previous or on-going experience implementing similar activities. This is a critical factor in assessing the capacity of the Grantee to

implement the activity. Applicant also provides contact information of references that can speak to the Applicant's past performance and capabilities.

- **Section V (Cost).** This is a summary of the information provided in the application budget forms, and includes total grant request, for the activity. Applicant also describes any other USG funding they are currently receiving for other purposes. Applicant must identify any long-term, recurrent commitments resulting from activity, and Applicant's plan for sustainable coverage.
- **Section VI (Budget).** The Budget forms, when properly completed, reviewed, and approved, serve as the mutually agreed-upon "roadmap" for activity financial management. All activity costs must be identified. Cost data must be accurate; proposed amounts should not be unrealistically high or low.

It is important that the budget clearly indicate where specific project funds are to come from (from USAID, co-funding by another donor, or the applicant's cost-sharing contribution). Furthermore, contribution from other donors and Grantees resource commitment will be investigated and documented. In order to avoid double financing/ billing, Afya Jijini will require full disclosure by all involved parties and will maintain contact with co-funders to verify their contributions.

Budgeted amounts must also be supported by justification, and the applicant must be able to provide such backup to Afya Jijini if requested.

All grant activity costs must be within the normal operating practices of the Applicant and in accordance with its written policies and procedures. For applicants without an audited indirect cost rate the budget may include direct costs that will be incurred by the Applicant to provide identifiable administrative and management costs that can be directly attributable to supporting the grant objective.

The application must be signed by an authorized agent of the Applicant.

G. 3. Application Submission Information

Applications shall include one copy in English.

Applications should be submitted in hard copy to the Afya Jijini office at the address below and should reference "**AJSG adherence RFA 2018- 010 dated January 10, 2018**" In addition, an electronic copy of the application should be emailed to the address provided below.

USAID/Kenya and East Africa
Afya Jijini Small Grants Program
Goodman Towers, 9th Floor
Waiyaki Way, Opposite Old Safaricom House
P.O. Box 21035 – 00505, Nairobi

e-mail: afyajijinigrants@imaworldhealth.org

In addition to the application forms, applicants should submit to Afya Jijini the following documents:

Afya Jijini Program Request for Applications

- **Copy of valid Kenya registration certificate.**
- **Copy of the organization's charter and by-laws.**
- **Copy of last three (3) years of annual financial report, income/losses report (balance) sealed and approved by licensed audit firm.**
- **Other documents (if necessary) may be requested at a later date.**

These can be submitted in hard copy; electronic copies are not required.

Applications (Technical and Budget proposals and supporting documentation) must be submitted **no later than 5:00 PM (local time), on February 10, 2018.**

Please submit all questions concerning this RFA to the attention of the Afya Jijini Program via email to **afyajijinigrants@imaworldhealth.org** the deadline for submitting questions or requests for clarifications is **January 17, 2018 (5:00 PM)**. Afya Jijini will reply to all questions and clarifications. Afya Jijini will hold an application development workshop on **Wednesday January 24, 2018 at the Prideinn Hotel on Westlands road from 9:00am** to ensure a common understanding of program goals, grant accountability mechanisms, and that grantees provide an evidence-based technical approach for increasing access and utilization of quality health services for high impact interventions and activities. Please send your requests for this assistance to **afyajijinigrants@imaworldhealth.org**

Issuance of this RFA and assistance with application development do not constitute an award or commitment on the part of Afya Jijini, nor does it commit Afya Jijini or the U.S. Government to pay for costs incurred in the preparation and submission of an application. Further, Afya Jijini reserves the right to accept or reject any or all applications received.

ANNEXES

- Annex A – Grant Application Form
- Annex B – Implementation Timeline
- Annex C – Grant Application Budget Forms
- Annex D – Applicant Self-Assessment Form
- Annex E - Required Certifications
- Annex F – Standard Provisions for Solicitations

ANNEX A – GRANT APPLICATION FORM

Afya Jijini may assist applicants in understanding the application process, and can provide coaching in application development at the request of applicants. You will also be provided with a detailed budget format that should be completed and submitted with your application.

AFYA JIJINI PROGRAM

FULL GRANT APPLICATION

This application is in response to AJSG Adherence 2018 – 010 RFA dated January 10, 2018

Section I. Basic Information

1. Details of your organization:

Name of the organisation:	
DUNS Number:	
SAM registration status (Registered/ not registered)	

2. Date organization was founded or registered:

3. Contact information:

Key contact person(s) and title:	
Office address:	Office phone:
Mobile:	Fax:
E-mail:	Website:

4. Name(s) and Nationality(ies) of CEO and/or Board of Directors/Governing Body:

Name:	Nationality:
Name:	Nationality:
Name:	Nationality:

5. Describe your organization and its purpose:

6. Annual revenue for your organization last year:

7. Number of full-time, part time employees and volunteers:

Section II. Program Description

8. Title of your proposed activity:
9. Objective of your proposed activity:
10. Background: What is the issue or problem that your activity will address? Why is it critical to address this issue?
11. Describe your activity in detail (or attach a project description):
12. On a form annexed to this application, please list the results to be achieved and the indicators you will use to measure success. In addition to quantitative indicators, you may also suggest others ways to measure success or impact.
13. Describe your method for selecting participants and beneficiaries.

Section III. Implementation Plan

14. Anticipated duration of your activity:

Overall length (total number of months)	
Start and end date (day, month, and year)	

15. Main tasks, with estimated start and end dates for each task. Please include all events, trainings, publications, etc.

Description of Main Tasks	Start & End Dates
Task 1:	
Task 2:	
Task 3:	
Task 4:	
Task 5:	
Task 6:	
Task 7, etc: (please add rows as needed)	

16. Location(s) of the activity (add more rows as needed).

#	Community	Municipality	Department	State
1				
2				
3				
4				
5				

Afya Jijini Program Request for Applications

- 17. List personnel who will be involved in implementing this project (CVs & salary history sheets are required for all project personnel):
- 18. List board members (or founding members if you do not have a formal board of directors) and key staff (president, directors, treasurer, etc). If available, please attach an organizational chart.

Section IV. Experience and Capacity

- 19. Experience Implementing Similar activities:
- 20. List three independent relevant professional references for the organization:

Section V. Cost

- 21. Estimated cost in KES per the attached budget:

Amount requested from the Afya Jijini program: KES _____
 In-kind or other contribution from your organization: KES _____
 Other donors or third-party resources: KES _____

 Total Estimated Cost KES _____

- 22. List major donor-funded activities (U.S. and other) that your organization has managed in the last two years and currently receives, or expects to receive within the duration of the grant activity:

Donor Agency	Title of Project, Location, & Start & End Dates	Total Funding (in currency received in)	Donor Contact Person
			Name: E-mail: Tel:
			Name: E-mail: Tel:
			Name: E-mail: Tel:

By affixing my signature below, I certify that to the best of my knowledge, the information provided in this application is accurate and correct:

Submitted by (name and title): _____

Signature: _____ Date: _____

ANNEX B – IMPLEMENTATION TIMELINE

IMPLEMENTATION TIME LINE														
Activity List each activity. Please be as specific as possible. Use additional pages if necessary.	Target Audience (if applicable) Who is the audience targeted for the activity?	Timeline by Month Place an X in the appropriate box to indicate the first and last month of the activity.											Evaluation Indicators How will you measure the success of the activity?	
		1	2	3	#	#	#	#	#	#	#	#		

ANNEX C – GRANT APPLICATION BUDGET FORMS

Please see attached Excel file

ANNEX D – APPLICANT SELF-ASSESSMENT FORM

Accepting a grant from Afya Jijini creates a legal duty for the grantee to use the funds according to the grant agreement and United States federal regulations. Prior to awarding a grant, Afya Jijini must assess the adequacy of the financial and accounting systems of a prospective grantee (and, if applicable, any sub recipients) to ensure accountability if a grant is awarded.

In filling out the Questionnaire, each question should be answered as completely as possible, using extra pages if necessary. Please return your completed questionnaire to Afya Jijini.

APPLICANT INFORMATION

Name of Organization:

Activity Title:

Name, Title, Contact Information of Individual Completing Questionnaire:

SECTION A: INTERNAL CONTROLS

Internal controls are procedures that ensure:

- a. financial transactions are approved by an authorized individual and follow laws, regulations and the organization's policies,
- b. assets are kept safely,
- c. Accounting records are complete, accurate and kept on a regular basis.

Please complete the following questions concerning your organization's internal controls:

1. List the name, position/title, and telephone number for the individuals responsible for checking expenditures to make sure they are allowable:

2. Responsible for maintaining accounting records: _____

3. Responsible for preparing financial reports: _____

4. Responsible for preparing narrative reports: _____

5. Are timesheets kept for each paid employee? Yes: ___ No: ___

6. Is your organization familiar with U.S. government regulations concerning costs which can be charged to U.S. grants (2 CFR 200, Subpart E)?

Yes: ___ No: ___

SECTION B: ACCOUNTING SYSTEM

The purpose of an accounting system is to 1) accurately record all financial transactions, and 2) ensure that all financial transactions are supported by invoices, timesheets and other documentation. The type of accounting system often depends on the size of the organization. Some organizations may have computerized accounting systems, while others use a manual system to record each transaction in a ledger. In either case, Afya Jijini grant funds must be properly authorized, used for the intended purpose and recorded in an organized and regular manner.

1. Briefly describe your organization's accounting system including: a) any manual ledgers used to record transactions (general ledger, cash disbursements ledger, suppliers ledger etc.); b) any computerized accounting system used (please indicate the name); and c) how transactions are summarized in financial reports, (by the period, project, cost categories)?

2. Does your organization have written accounting policies and procedures?

Yes: No:

3. Are your financial reports prepared on a: Cash basis: Accrual basis: (Accrual - bill for costs before they are incurred)

4. Can your accounting records separate the receipts and payments of the Afya Jijini grant from the receipts and payments of your organization's other activities? Yes: No:

5. Can your accounting records summarize expenditures from the Afya Jijini grant according to different budget categories such as salaries, rent, supplies and equipment?

Yes: No:

6. How do you allocate costs that are "shared" by different funding sources, such as rent, utilities, etc.?

7. How often are financial reports prepared?

Monthly: Quarterly: Annually: Not Prepared: (explain)

Afya Jijini Program Request for Applications

8. How often do you input entries into the financial system?
a. daily ___ b. weekly ___ c. monthly ___ d. ad hoc/as needed ___

9. How often do you do cash reconciliations?
a. daily ___ b. weekly ___ c. monthly ___ d. ad hoc/as needed ___

10. Do you keep invoices, vouchers and timesheets for all payments made from grant funds?

Yes: ___ No: ___

SECTION C: FUNDS CONTROL

Afya Jijini grantees and recipients who receive advances of grant funds must maintain a separate bank account registered in the name of the organization for the purpose of keeping only Afya Jijini grant funds. The bank account must be in local currency. Afya Jijini normally pays grantees monthly by bank transfer to the separate account. Access to the bank account must be limited to authorized individuals. Bank balances should be compared each month with your accounting records. For petty cash, it is very important to keep the cash in a strong safe and have strict controls over cash maintenance and disbursement.

1. Do you have a bank account registered in the name of your organization?
Yes: ___ No: ___

2. Will the bank account draw interest?
Yes: ___ No: ___

3. Are all bank accounts and check signers authorized by the organization's Board of Directors or Trustees or other authorized persons?
Yes: ___ No: ___

4. Will any cash from Afya Jijini grant funds be kept outside the bank account (in petty cash funds, etc.)?
Yes: ___ No: ___

4.a. If yes, please explain the amount of funds to be kept and the name and position/title of the person responsible for safeguarding cash.

SECTION D: AUDIT

Afya Jijini may require an audit of your organization's accounting records. An audit is a review of your accounting records by an independent accountant who works for an accounting firm. An audit report contains your financial statements as well as an opinion by the accountant that your financial statements are correct. Please provide the following information on prior audits of your organization.

1. Does your organization have regular independent audits that you contract and pay for?
Yes: ___ (please provide the most recent copy) No audits performed: ___

2. If yes, who performs the audit?

ANNEX E

A. REQUIRED CERTIFICATIONS, ASSURANCES AND OTHER STATEMENTS OF THE RECIPIENTS

CERTIFICATION 1: CERTIFICATION REGARDING TERRORIST FINANCING (ATC)

By signing and submitting this application, the prospective recipient provides the certification set out below:

1. The Recipient, to the best of its current knowledge, did not provide, within the previous ten years, and will take all reasonable steps to ensure that it does not and will not knowingly provide, material support or resources to any individual or entity that commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated, or participated in terrorist acts, as that term is defined in paragraph 3. The Certification in the preceding sentence will not be deemed applicable to material support or resources provided by the Recipient pursuant to an authorization contained in one or more applicable licenses issued by the U.S. Treasury's Office of Foreign Assets Control (OFAC).
2. The following steps may enable the Recipient to comply with its obligations under paragraph 1:
 - a. Before providing any material support or resources to an individual or entity, the Recipient will verify that the individual or entity does not (i) appear on the master list of Specially Designated Nationals and Blocked Persons, which list is maintained by the U.S. Treasury's Office of Foreign Assets Control (OFAC) and is available online at OFAC's website: <http://www.treas.gov/offices/eotffc/ofac/sdn/t11sdn.pdf>, or (ii) is not included in any supplementary information concerning prohibited individuals or entities that may be provided by USAID to the Recipient.
 - b. Before providing any material support or resources to an individual or entity, the Recipient also will verify that the individual or entity has not been designated by the United Nations Security (UNSC) sanctions committee established under UNSC Resolution 1267 (1999) (the "1267 Committee") [individuals and entities linked to the Taliban, Usama bin Laden, or the Al Qaida Organization]. To determine whether there has been a published designation of an individual or entity by the 1267 Committee, the Recipient should refer to the consolidated list available online at the Committee's website: <http://www.un.org/Docs/sc/committees/1267/1267ListEng.htm>.
 - c. Before providing any material support or resources to an individual or entity, the Recipient will consider all information about that individual or entity of which it is aware and all public information that is reasonably available to it or of which it should be aware.
 - d. The Recipient also will implement reasonable monitoring and oversight procedures to safeguard against assistance being diverted to support terrorist activity.
3. For purposes of this Certification.
 - a. "Material support and resources" means currency or monetary instruments or financial securities, financial services, lodging, training, expert advice or assistance, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials."

- (i) "Training" means instruction or teaching designed to impart a specific skill, as opposed to general knowledge.
- (ii) "Expert advice or assistance" means advice or assistance derived from scientific, technical, or other specialized knowledge.
- b. "Terrorist act" means-(i) an act prohibited pursuant to one of the 12 United Nations Conventions and Protocols related to terrorism (see UN terrorism conventions Internet site: <http://untreaty.un.org/English/Terrorism.asp>); or (ii) an act of premeditated, politically motivated violence perpetrated against noncombatant targets by sub-national groups or clandestine agents; or (iii) any other act intended to cause death or serious bodily injury to a civilian, or to any other person not taking an active part in hostilities in a situation of armed conflict, when the purpose of such act, by its nature or context, is to intimidate a population, or to compel a government or an international organization to do or to abstain from doing any act.
- c. "Entity" means a partnership, association, corporation, or other organization, group or subgroup.
- d. References in this Certification to the provision of material support and resources shall not be deemed to include the furnishing of USAID funds or USAID-financed commodities to the ultimate beneficiaries of USAID assistance, such as recipients of food, medical care, micro-enterprise loans, shelter, etc., unless the Recipient has reason to believe that one or more of these beneficiaries commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.
- e. The Recipient's obligations under paragraph 1 are not applicable to the procurement of goods and/or services by the Recipient that are acquired in the ordinary course of business through contract or purchase, e.g., utilities, rents, office supplies, gasoline, etc., unless the Recipient has reason to believe that a vendor or supplier of such goods and services commits, attempts to commit, advocates, facilitates, or participates in terrorist acts, or has committed, attempted to commit, facilitated or participated in terrorist acts.

This Certification is an express term and condition of any agreement issued as a result of this application, and any violation of it shall be grounds for unilateral termination of the agreement by USAID prior to the end of its term.

Name: _____

Title: _____

Organization: _____

Signature: _____

Date: _____

CERTIFICATION 2: CERTIFICATION OF RECIPIENT

By signing below the recipient provides certifications and assurances for, (1) the Certification Regarding Terrorist Financing Implementing Executive Order 13224.

These certifications and assurances are given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts, or other Federal financial assistance extended after the date hereof to the recipient by the Agency, including installment payments after such date on account of applications for Federal financial assistance which was approved before such date. The recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in these assurances, and that the United States will have the right to seek judicial enforcement of these assurances.

These assurances are binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign these assurances on behalf of the recipient.

Name: _____

Title: _____

Organization: _____

Signature: _____

Date: _____

CERTIFICATION 3: KEY INDIVIDUAL CERTIFICATION NARCOTICS OFFENSES AND DRUG TRAFFICKING

I certify that within the last ten years:

1. I have not been convicted of a violation of, or a conspiracy to violate, any law or regulation of the United States or any other country concerning narcotic or psychotropic drugs or other controlled substances.
2. I am not and have not been an illicit trafficker in any such drug or controlled substance.
3. I am not and have not been a knowing assistor, abettor, conspirator, or colluder with others in the illicit trafficking in any such drug or substance.

Signature: _____

Date: _____

Name: _____

Title/Position: _____

Organization: _____

Address: _____

Date of Birth: _____

NOTICE:

1. You are required to sign this Certification under the provisions of 22 CFR Part 140, Prohibition on Assistance to Drug Traffickers. These regulations were issued by the Department of State and require that certain key individuals of organizations must sign this Certification.
2. If you make a false Certification you are subject to U.S. criminal prosecution under 18 U.S.C. 1001.

CERTIFICATION 4: REPRESENTATION BY ORGANIZATION REGARDING A DELINQUENT TAX LIABILITY OR A FELONY CRIMINAL CONVICTION

(a) As required by sections 744 and 745 of Division E of the Consolidated and Further Continuing Appropriations Act, 2015 (Pub. L. 113-235), and similar provisions, if contained in subsequent appropriations acts, none of the funds made available by that Act may be used to enter into an assistance award with any organization that –

(1) “Was convicted of a felony criminal violation under any Federal law within the preceding 24 months, where the awarding agency has direct knowledge of the conviction, unless the agency has considered, in accordance with its procedures, that this further action is not necessary to protect the interests of the Government”; or

(2) “Has any unpaid Federal tax liability that has been assessed for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability, where the awarding agency has direct knowledge of the unpaid tax liability, unless the Federal agency has considered, in accordance with its procedures, that this further action is not necessary to protect the interests of the Government”.

It is USAID’s policy that no award may be made to any organization covered by (1) or (2) above, unless the M/OAA Compliance Division has made a determination that suspension or debarment is not necessary to protect the interests of the Government.

(b) Applicant Representation:

1) The Applicant represents that it is is not an organization that was convicted of a felony criminal violation under a Federal law within the preceding 24 months.

(2) The Applicant represents that it is is not an organization that has any unpaid Federal tax liability that has been assessed for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability.

Name: _____

Title: _____

Organization: _____

Signature: _____

Date: _____

B. STATEMENTS OF RECIPIENT

1. Authorized Individuals

The recipient represents that the following persons are authorized to negotiate on its behalf with the Government and to bind the recipient in connection with this application or grant:

Name	Title	Telephone No.	Facsimile No.

2. Taxpayer Identification Number (TIN) (if applicable)

If the recipient is a U.S. organization, or a foreign organization which has income effectively connected with the conduct of activities in the U.S. or has an office or a place of business or a fiscal paying agent in the U.S., please indicate the recipient's TIN:

TIN: _____

3. Data Universal Numbering System (DUNS) Number

(a) Unless otherwise specified in the solicitation using an applicable exemption, in the space provided at the end of this provision, the recipient should supply the Data Universal Numbering System (DUNS) number applicable to that name and address. Recipients should take care to report the number that identifies the recipient's name and address exactly as stated in the proposal.

(b) The DUNS is a 9-digit number assigned by Dun and Bradstreet Information Services. If the recipient does not have a DUNS number, the recipient should call Dun and Bradstreet directly at 1-800-333-0505. A DUNS number will be provided immediately by telephone at no charge to the recipient. The recipient should be prepared to provide the following information:

- (1) Recipient's name.
- (2) Recipient's address.
- (3) Recipient's telephone number.
- (4) Line of business.
- (5) Chief executive officer/key manager.
- (6) Date the organization was started.
- (7) Number of people employed by the recipient.
- (8) Company affiliation.

(c) Recipients located outside the United States may email Dun and Bradstreet at globalinfo@dbisma.com to obtain the location and phone number of the local Dun and Bradstreet Information Services office.

The DUNS system is distinct from the Federal Taxpayer Identification Number (TIN) system.

DUNS: _____

4. Letter of Credit (LOC) Number (if applicable)

If the recipient has an existing Letter of Credit (LOC) with USAID, please indicate the LOC number: LOC:

5. Procurement Information (if applicable)

(a) **Applicability.** This applies to the procurement of goods and services planned by the recipient (i.e., contracts, purchase orders, etc.) from a supplier of goods or services for the direct use or benefit of the recipient in conducting the program supported by the grant, and not to assistance provided by the recipient (i.e., a subgrant or subagreement) to a subgrantee or subrecipient in support of the subgrantee’s or subrecipient’s program. Provision by the recipient of the requested information does not, in and of itself, constitute USAID approval.

(b) **Amount of Procurement.** Please indicate the total estimated dollar amount of goods and services which the recipient plans to purchase under the grant: \$_____

(c) **Nonexpendable Property.** If the recipient plans to purchase nonexpendable equipment which would require the approval of the Agreement Officer, indicate below (using a continuation page, as necessary) the types, quantities of each, and estimated unit costs. Nonexpendable equipment for which the Agreement Officer's approval to purchase is required is any article of nonexpendable tangible personal property charged directly to the grant, having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

TYPE/DESCRIPTION (Generic)	_____
QUANTITY	_____
ESTIMATED UNIT COST	_____

(d) **Source** If the recipient plans to purchase any goods/commodities which are not in accordance with the Standard Provision “USAID Eligibility Rules for Procurement of Commodities and Services,” indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, and probable source. “Source” means the country from which a commodity is shipped to the cooperating country or the cooperating country itself if the commodity is located in the cooperating country at the time of purchase. However, where a commodity is shipped from a free port or bonded warehouse in the form in which received, “source” means the country from which the commodity was shipped to the free port or bonded warehouse. Additionally, “available for purchase” includes “offered for sale at the time of purchase” if the commodity is listed in a vendor’s catalog or other statement of inventory, kept as part of the vendor’s customary business practices and regularly offered for sale, even if the commodities are not physically on the vendors’ shelves or even in the source country at the time of the order. In such cases, the recipient must document that the commodity was listed in the vendor’s catalog or other statement of inventory; that the vendor has a regular and customary business practice of selling the commodity through “just in time” or other similar inventory practices; and the recipient did not engage the vendor to list the commodity in its catalog or other statement of inventory just to fulfill the recipient’s request for the commodity.

TYPE/DESCRIPTION	_____
QUANTITY	_____

Afya Jijini Program Request for Applications

ESTIMATED GOODS _____
PROBABLE GOODS _____
PROBABLE (Generic) _____
UNIT COST _____
SOURCE _____

(e) Restricted Goods. If the recipient plans to purchase any restricted goods, indicate below (using a continuation page, as necessary) the types and quantities of each, estimated unit costs of each, intended use, and probable source. Restricted goods are Agricultural Commodities, Motor Vehicles, Pharmaceuticals, Pesticides, Used Equipment, U.S. Government-Owned Excess Property, and Fertilizer.

TYPE/DESCRIPTION _____
QUANTITY _____
ESTIMATED _____
PROBABLE _____
INTENDED USE (Generic) _____
UNIT COST _____
SOURCE _____

(f) Supplier Nationality. If the recipient plans to purchase any goods or services from suppliers of goods and services whose nationality is not in accordance with the Standard Provision “USAID Eligibility Rules for Procurement of Commodities and Services,” indicate below (using a continuation page, as necessary) the types and quantities of each good or service, estimated costs of each, probable nationality of each non-U.S. supplier of each good or service, and the rationale for purchasing from a non-U.S. supplier.

TYPE/DESCRIPTION _____
QUANTITY _____
ESTIMATED _____
PROBABLE SUPPLIER _____
NATIONALITY _____
RATIONALE (Generic) _____
UNIT COST (Non-US Only) _____
FOR NON-US _____

6. Past Performance References

On a continuation page, please provide past performance information requested in the RFA.

7. Type of Organization

The recipient, by checking the applicable box, represents that –

(a) If the recipient is a U.S. entity, it operates as a corporation incorporated under the laws of the State of, an individual, a partnership, a nongovernmental nonprofit organization, a state or local governmental organization, a private college or university, a public college or university, an international organization, or a joint venture; or

(b) If the recipient is a non-U.S. entity, it operates as a corporation organized under the laws of _____ (country), an individual, a partnership, a nongovernmental

nonprofit organization, a nongovernmental educational institution, a governmental organization, an international organization, or a joint venture.

8. Estimated Costs of Communications Products (if applicable)

The following are the estimate(s) of the cost of each separate communications product (i.e., any printed material [other than non-color photocopy material], photographic services, or video production services) which is anticipated under the grant. Each estimate must include all the costs associated with preparation and execution of the product. Use a continuation page as necessary.

ANNEX F
STANDARD PROVISIONS FOR SOLICITATIONS

1. Branding Strategy – Assistance (June 2012)

a. Applicants recommended for an assistance award must submit and negotiate a "Branding Strategy," describing how the program, project, or activity is named and positioned, and how it is promoted and communicated to beneficiaries and host country citizens.

b. The request for a Branding Strategy, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Branding Strategy within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Branding Strategy must include, at a minimum, all of the following:

(1) All estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth.

(2) The intended name of the program, project, or activity.

(i) USAID requires the applicant to use the "USAID Identity," comprised of the USAID logo and landmark, with the tagline "from the American people" as found on the USAID Web site at <http://www.usaid.gov/branding>, unless Section VI of the RFA or APS states that the USAID Administrator has approved the use of an additional or substitute logo, seal, or tagline.

(ii) USAID prefers local language translations of the phrase "made possible by (or with) the generous support of the American People" next to the USAID Identity when acknowledging contributions.

(iii) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.

(iv) If branding in the above manner is inappropriate or not possible, the applicant must explain how USAID's involvement will be showcased during publicity for the program or project.

(v) USAID prefers to fund projects that do not have a separate logo or identity that competes with the USAID Identity. If there is a plan to develop a separate logo to consistently identify this program, the applicant must attach a copy of the proposed logos. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

(3) The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.

(4) Planned communication or program materials used to explain or market the program to beneficiaries.

(i) Describe the main program message.

(ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.

(iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth. Applicant must incorporate the USAID Identity and the message, "USAID is from the American People."

(iv) Provide any additional ideas to increase awareness that the American people support this project or program.

(5) Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.

(6) Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.

e. The Agreement Officer will review the Branding Strategy to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.

f. If the applicant receives an assistance award, the Branding Strategy will be included in and made part of the resulting grant or cooperative agreement
(END OF PROVISION)

2. Marking Plan – Assistance (June 2012)

a. Applicants recommended for an assistance award must submit and negotiate a "Marking Plan," detailing the public communications, commodities, and program materials, and other items that will visibly bear the "USAID Identity," which comprises of the USAID logo and brandmark, with the tagline "from the American people." The USAID Identity is the official marking for the Agency, and is found on the USAID Web site at <http://www.usaid.gov/branding>. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

b. The request for a Marking Plan, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Marking Plan within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be

incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Marking Plan must include all of the following:

(1) A description of the public communications, commodities, and program materials that the applicant plans to produce and which will bear the USAID Identity as part of the award, including:

(i) Program, project, or activity sites funded by USAID, including visible infrastructure projects or other sites physical in nature;

(ii) Technical assistance, studies, reports, papers, publications, audio-visual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;

(iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and

(iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.

(v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.

(2) A table on the program deliverables with the following details:

(i) The program deliverables that the applicant plans to mark with the USAID Identity;

(ii) The type of marking and what materials the applicant will use to mark the program deliverables;

(iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;

(iv) What program deliverables the applicant does not plan to mark with the USAID Identity , and

(v) The rationale for not marking program deliverables.

(3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:

(i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Development Objective, Interim Result, or program goal furthered by an appearance of neutrality, or state why an aspect of the award is presumptively neutral. Identify by category or deliverable item, examples of material for which an exemption is sought.

(ii) Diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent. The applicant must explain why each particular deliverable must be seen as credible.

(iii) Undercut host-country government “ownership” of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications. The applicant must explain why each particular item or product is better positioned as host-country government item or product.

(iv) Impair the functionality of an item. The applicant must explain how marking the item or commodity would impair its functionality.

(v) Incur substantial costs or be impractical. The applicant must explain why marking would not be cost beneficial or practical.

(vi) Offend local cultural or social norms, or be considered inappropriate. The applicant must identify the relevant norm, and explain why marking would violate that norm or otherwise be inappropriate.

(vii) Conflict with international law. The applicant must identify the applicable international law violated by the marking.

f. The Agreement Officer will consider the Marking Plan's adequacy and reasonableness and will approve or disapprove any exemption requests. The Marking Plan will be reviewed to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.

g. If the applicant receives an assistance award, the Marking Plan, including any approved exemptions, will be included in and made part of the resulting grant or cooperative agreement, and will apply for the term of the award unless provided otherwise.

(END OF PROVISION)

3. Conscience Clause Implementation (Assistance) – Solicitation

(a) An organization, including a faith-based organization, that is otherwise eligible to receive funds under this agreement for HIV/AIDS prevention, treatment, or care—

1) Shall not be required, as a condition of receiving such assistance—

- (i) to endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS; or
- (ii) to endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and

2) Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a)(1) above.

(b) An applicant who believes that this solicitation contains provisions or requirements that would require it to endorse or use an approach or participate in an activity to which it has a religious or moral objection

must so notify the cognizant Agreement Officer in accordance with the Mandatory Standard Provision titled “Notices” as soon as possible, and in any event not later than 15 calendar days before the deadline for submission of applications under this solicitation. The applicant must advise which activity(ies) it could not implement and the nature of the religious or moral objection.

(c) In responding to the solicitation, an applicant with a religious or moral objection may compete for any funding opportunity as a prime partner, or as a leader or member of a consortium that comes together to compete for an award. Alternatively, such applicant may limit its application to those activities it can undertake and must indicate in its submission the activity(ies) it has excluded based on religious or moral objection. The offeror’s proposal will be evaluated based on the activities for which a proposal is submitted, and will not be evaluated favorably or unfavorably due to the absence of a proposal addressing the activity(ies) to which it objected and which it thus omitted. In addition to the notification in paragraph (b) above, the applicant must meet the submission date provided for in the solicitation.
(END OF PROVISION)

4. Prohibition on Providing Federal Assistance to Entities that Require Certain Internal Confidentiality Agreements – Representation (April 2015)

(a) In accordance with section 743 of Division E, Title VII, of the Consolidated and further Continuing Resolution Appropriations Act, 2015 (Pub. L. 113-235), Government agencies are not permitted to use funds appropriated (or otherwise made available) under that or any other Act for providing federal assistance to an entity that requires employees, subawardees or contractors of such entity seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees, subawardees, or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

(b) The prohibition in paragraph (a) of this provision does not contravene requirements applicable to Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the nondisclosure of classified information.

(c) By submission of its application, the prospective recipient represents that it does not require employees, subawardees, or contractors of such entity seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees, subawardees, or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.
(END OF PROVISION)

FOR PROJECT USE ONLY

Date received _____ Grant Reference No. _____

The undersigned hereby certifies that: (a) the prospective grantee has received an official delivery receipt for its *Grant Application*, (b) a copy of that receipt has been filed, (c) a reference number has been assigned, and (d) a grant application file has been opened. In addition, the prospective grantee has been advised as to the review and appraisal process, and its primary project point of contact.

Grants Manager _____ Date _____

ANNEX 1: AFYA JIJINI-SUPPORTED HIGH-VOLUME FACILITIES IN 2018

No.	Facility	Sub-County	Clients Current on Treatment
1	Mbagathi County hospital	Langata	4505
2	St Mary`s Mission hospital	Langata	3367
3	Mathare North health center	Ruaraka	2337
4	Gertrudes hospital	Westlands	1937
5	Dandora II health centre	Ruaraka	1575
6	Kangemi health center	Westlands	1294
7	Kayole II Sub-County hospital	Embakasi	1262
8	Westlands health centre	Westlands	1177
9	Special Treatment Clinic (STC) Casino	Starehe	1144
10	Makadara health center	Makadara	1032
11	Kariobangi health centre	Ruaraka	965
12	Mama Lucy Kibaki hospital	Embakasi	873
13	Kasarani dispensary	Kasarani	855
14	St Francis Community hospital	Kasarani	811
15	Mukuru MMM Clinic	Embakasi	783
16	Lunga Lunga health center	Makadara	711
17	Ngaira Rhodes dispensary	Starehe	710
18	Amurt medical center	Westlands	653
19	Metropolitan hospital	Makadara	572
20	Jericho health centre	Embakasi	555
21	Uzima dispensary	Ruaraka	544
22	Soweto Kayole PHC	Embakasi	543