



1st for women
trust

1st for women trust | Cervical Cancer Programme
Reporting Form 2013

1st for women Cervical Cancer Programme Reporting form 2013

This form is an editable pdf form. Please complete all fields, then save your file.

Submission via email is preferred, but ensure that the total size of the email including attachments is no more than 5 MB. Alternatively, print and post or deliver the form and attachments to Tshikululu Social Investments. Do not email and post duplicate applications.

Please note: the 'save' functionality is only enabled in later versions of Adobe Acrobat Reader. If you cannot save your form, visit <http://get.adobe.com/reader> to upgrade to the latest version, or print this form, and complete in black ink.

Please use the application form provided on the following pages. Using another application form and / or template is not acceptable and will negatively impact your opportunity to receive further funding.

All sections of the reporting form need to be completed in order for your application to be considered.

The 1st for women trust is required by the BEE Codes of Good Practice No. 29617 of 2007, statement 700, section 3 (3.2) (3.2.2) and (3.2.3) to provide the ethnic and gender breakdown of all the beneficiaries of its corporate social investment.

Please keep a copy of your application, as your organisation will be required to report on the activities set out in the application should funding be approved.

Send your application form together with the attachments to one of the addresses below. Do not forget to keep a copy of your report. Should you have any queries, please contact Tshikululu Social Investments, administrators of the 1st for women trust, on 011 544 0300.

By email: ffw@tshikululu.org.za

By hand:

1st for women trust
Metropolitan Office Park, Block B
8 Hillside Road
Parktown 2193

By post:

1st for women
Private Bag X125
Braamfontein 2017

Date of submission:
Name of organisation:
Name of funded project:
Grant amount in Rands:
Project reference number:
Reporting period: (month) (year) to (month) (year)
Is this a multi-year grant?	yes <input type="checkbox"/> no <input type="checkbox"/>
If yes, on which year are you reporting?	year out of years



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Section 1 – Organisation overview

Name of organisation:

Date established: PBO number (from SARS):

Company registration no.: Trust registration no.:

1. Contact details

Physical address including province and code:

Postal address including postcode:

Telephone number: Fax number:

Organisation website:

2. Details of contact person for this application

Full name and designation:

Direct tel. & cell no.: Direct email:

3. Details of alternate contact person

Full name and designation:

Direct tel. & cell no.: Direct email:



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Please provide information below for the **specific project** for which your organisation received funding as per your original application and signed grant letter.

This section is vital to your opportunity of receiving future funding so please ensure that the information you provide is as complete and as detailed as possible within the space provided.

Section 2 - Narrative report on your grant

Name of project:

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Actual project start date:

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If the project was delayed, provide reasons:

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1. Project outcomes

Primary project objectives:

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Activities completed using this grant:

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Section 2 - Narrative report on your grant continued

If you made any changes to the original project plan, please describe them:

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What were the highlights of the project during the reporting period?:

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What challenges did the project face during the reporting period?:

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Section 2 - Narrative report on your grant continued

2. Project impact

In one sentence, what was the impact of this grant?

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3. Project impact – beneficiaries

	Total	Female	Male	African	Coloured	Indian / Asian	White	Other/ Unknown	Disability
Direct									
Indirect									

Numbers should only refer to activities completed with 1st for women trust monies.

“Direct beneficiary” refers to a person, group of persons or organisation that has direct contact with the intervention or project.

“Indirect beneficiary” refers to a person, group of persons or organisation that has no direct contact with an intervention or project but which is affected by it via a direct beneficiary.

Describe your direct beneficiaries:

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Describe your indirect beneficiaries:

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Section 2 - Narrative report on your grant continued

4. Case study and / or success story from the reporting period describing how an individual, organisation or community has changed as a result of this project

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5. Describe a specific challenge associated with the implementation of this project and how it was dealt with

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Your inputs should reflect the number of beneficiaries reached in the last year of funding through the particular project funded by the Trust in the areas of **Screening for cervical cancer and/or, Vaccination against HPV and/or Health promotion through education and awareness.**

Please record your **target** and **actual** figures, then show your actual figures disaggregated by race, gender and disability status. Don't forget to account for any differences in the comments section at the end of the table.

Section 3 - Monitoring and Evaluation										
Indicator	Target	Actual	Female	Male	African	Coloured	Indian/ Asian	White	Other/ Unknown	Disability
Total number of women who accessed any form of care in your facility										
Number of mobile health units in operation as a result of funding received										
Number of women and girls who were exposed to education or awareness programmes for cervical cancer										
Number of women and girls who received HPV Vaccination										
Number of women who received a pap smear in the reporting period										
Number of women who received testing for cervical cancer other than through a pap smear (e.g. VIA - Visual inspection with acetic acid)										
Number of women who received results of pap smear										
Number of women diagnosed with cervical cancer										
Number of women who received treatment for symptoms of HPV										
Number of women who received treatment for cervical cancer										
Number of women who received treatment for an STD										
Comments										



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Section 4 - Your organisation						
1. Please indicate any changes to your board as per the table below						
Full name	Role	Race	Gender	Race	Disability Y/N	Resigned or Appointed
2. Please indicate any changes to your management as per the table below						
Full name	Role	Race	Gender	Race	Disability Y/N	Resigned or Appointed
3. Please provide further information in the event of high management turnover or key resignations from the board						

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Section 4 - Your organisation continued

4. More about you organisation

Have there been any changes to your organisation in the reporting period?
For example:

- new funders or fewer funders
- new strategy/business plan
- projects closing or new ones opening
- provincial spread changing

What have been the organisation's key achievements during the reporting period?

Excluding fundraising, what have been your organisation's key challenges during the reporting period?



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Section 5 - Attachments				
Document	Check if attached	Provide reason if not attached		
Latest annual report	<input type="checkbox"/>			
Latest set of unabridged, signed audited financial statements	<input type="checkbox"/>			
If your organisation has an associated Trust or any other body that contributes to the finances of the organisation, please submit the audited financial statements of this body	<input type="checkbox"/>			
Financial report for the grant, including original planned budget and actual expenditure	<input type="checkbox"/>			
Photographs of your work	<input type="checkbox"/>			
(NB: the Fund assumes that we have permission to use any photographs submitted for the purpose of our own reporting and publicity unless the photograph is clearly marked to the contrary.)	<input type="checkbox"/>			
Any new internal or external evaluations of the impact of the work of your organisation	<input type="checkbox"/>			

