AMERICAN SCHOOLS AND HOSPITALS ABROAD (ASHA)

Application for Assistance

This application is for use by private non-profit U.S. organizations requesting grant assistance for overseas institutions under Section 214 of the Foreign Assistance Act, as amended. "Applicant" refers to the United States Organization (USO), the sponsor of the Overseas Institution (OSI). Applications must be postmarked by June 30th for consideration during the following fiscal year beginning October 1st.

Applications will be accepted only from bona fide and financially responsible applicants. Those applicants who have not previously done so, must provide – among other things – the following information: applicant's articles of incorporation; by-laws; and evidence of U.S. Internal Revenue Service's recognition of tax-exempt status.

The information provided about the USO, the OSI, and the grant proposal should be **thorough and concise using a Times New Roman 10-point font size**. Use examples to support general statements.

Finally, this application is comprised of four sections. They are: Section 1 – General Information; Section 2 – the Project; Section 3 – the United States Organization (USO); and Section 4 – the Overseas Institution (OSI).

Please feel free to use the Continuation Page at the end of the application should you require additional space in any of the sections. We also ask that you label and attach each continuation page appropriately.

The submission of the application package requires completed **duplicate copies** of the following: the application, all required certifications, articles of incorporation, by-laws and proof of private non-profit status. Also required are **duplicate copies** of the latest (within the past two years) financial statements of both the USO and OSI prepared by independent public accountant(s) indicating the organizations' conformity with U.S. Government accounting principles (OMB Circular A-133). The required certifications (including Lobbying Activities and Terrorist Financing) along with other related information may be found at www.usaid.gov/asha.

The public reporting burden for the collection of information is estimated to average 12 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. USAID may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. All financial data submitted will not be released without prior consent from applicant. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

U.S. Agency for International Development

American Schools and Hospitals Abroad

Washington, DC 20523-8700

and

Office of Management and Budget

Paperwork Reduction Project (0412-0011)

Washington, D.C. 20503

Section 1. General Information		
1.1. United States Organization (USO) Information:		
Name:		
Address 1:		
Address 2:		
City:	State:	Zip:
Phone:		
Fax Number:		
Email:		
Website:		
Amount Requested from ASHA:		For Fiscal Year:

Type of organization:
    Non-Profit Organization
    Other
	USO is the OSI's:
	
	    Founder Sponsor
		Date organization established:

OSI name: OSI country:	Date USO's sponsorship of OSI commenced:	Jurisdiction of USO incorporation:
IRS exemption: Code:	IRS exemption number:	Date IRS exemption issued:
1.2. USO Authorized Representative:		
First Name:	Last Name:	
Title:		
Address 1:		
Address 2:		
City:	State:	Zip:
Phone:		
Email:		
Website:		
1.3. Overseas Institution (OSI) Information:		
Name:		
Address 1:		
Address 2:		
City:		
State/Province:		
Postal Code:		
Country:		
Phone:		
Email:		
Website:		
Date Established:	Chartered By:	Accredited By:
1.4. Information on the Principal Officer of the OSI:		
First Name:	Last Name:	
Title:		
Address 1:		
Address 2:		
City:		
State/Province:		
Postal Code:		
Country:		
Phone:		
Email:		
Website:		

1.5. DATA SUMMARY SHEET IN USD					

Year of request: Name of the Overseas Institution:

Name of the U.S. Sponsor:

Overseas Institution's fiscal year: Month fiscal year begins: Month fiscal year ends:

INCOME	AMOUNT	%	EXPENSES	AMOUNT	%
▪ Tuition/Fees			▪ Faculty/Medical Staff		
▪ Private Gifts and Grants from			▪ Administrative Staff		
▪ U.S. Sources			▪ Operation/Maintenance/Overhead		
▪ Host Country Sources			▪ Auxiliary Enterprises		
▪ International Sources			▪ Students' Services/Activities		
▪ Government Grants/Contracts			▪ Student-aid/Scholarships		
▪ ASHA			▪ Outreach/Extension, etc.		
▪ Other USAID			▪ Plant improvement		
▪ Other U.S. Government			▪ Debt Service		
▪ Host Country Government			▪ Cash Transfers		
▪ Other Donor Government			▪ Publicity/Fundraising		
▪ International Agencies			▪ Other (specify) _____		
▪ Auxiliary Enterprises (specify)			▪		
▪ Endowment Income			▪		
▪ Other Sources (specify below)			▪		
TOTAL INCOME:			**TOTAL EXPENSES:**		

ENDOWMENT	Year	BENEFICIARIES	
Market Value		**Students:**	
% Return on Value		▪ No. Full-Time Degree Earning	
PHYSICAL PLANT	Year	▪ No. Part-Time Degree Earning	
Replacement Value		▪ No. Non-Degree	
Date of Last Assessment		**TOTAL: EACH**	
PRIVATE FUNDRAISING	Year	**Patients**	
Contributions number amount		▪ Inpatients (annually)	
▪ Individuals Foundations/Corporations		▪ Outpatients (annually)	
▪ Alumni		**TOTAL: EACH**	
Total Donors ▪ Alumni as % Value of Private Gifts ( )		**Others** benefiting from outreach/ activities not included in the above	

SUMMARY of USE of REQUESTED FUNDS: A grant of U.S. Dollars $_____ is requested on behalf of the overseas institution to (describe in 25 words or less)

Section 2. The Project

Program Criteria: *A USO requesting capital construction assistance must provide information sufficient to permit a firm estimate of the total cost to the U.S. Government of the construction for which assistance is requested. Such USO must also provide information and assurance with respect to rights to the land on which construction is planned.*

Program Criteria: *To help achieve the objectives of the Foreign Assistance Act and ensure that the American Schools and Hospitals Abroad program is as geographically balanced as possible, special consideration will be given to applications for institutions that increase the geographical distribution of the program and contribute to economic and social progress of areas that are the focus of U.S.A.I.D.'s development efforts.*

Briefly describe the purpose and justification of the project.

2.1. Describe the project:

How does the project relate to the OSI's longer-term strategy?

2.2. How does the project promote American ideas and practices?

2.3. Justify the project in terms of:

Need:

Benefits and expected results (Quantify the number of trainees, people served, research outputs, beneficiaries/participants):

2.4. Project Management:

How will the project be implemented?

How will the project be sustained (recurring costs, maintenance, etc.)? Are there trained staff available to maintain equipment?

2.5. Total project budget (broken down by major elements and represented in USD):

Project type	ASHA	USO	OSI	Other Sources (Please list and specify other sources in the space provided below.)	**Total**
Professional Services:					
Construction:					
Renovation:					
Commodities:					
Vehicles:					
Program Support:					
Total:					

Please specify and list other sources:

FOR CONSTRUCTION AND RENOVATION PROJECTS ONLY (Sections 2.6, 2.7, 2.8)
(Generally ASHA funds will not be approved to add floors or stories to the top of existing structures.)

2.6. Architectural Engineering and Planning. Extent of architectural-engineering (A/E) planning undertaken to date:
Name(s) and address(es) of A/E firm(s) or consultant(s): Include with this application initial (A/E) plans and cost estimates, and certification of land rights and permits, as applicable.

2.7. Status of land (please check the box that applies):
 	
   Land Owned
   Land Leased, if so please answer the following:
       How long?
       Date of Expiration

2.8. Host Country approval

Has the Host Country Government approved the OSI's construction plans?
 	
   Yes
   No

If Yes, Specify: Name and Title:
Date of Approval:
Ministry or Entity:
Indicate any pending approval needed:

Section 3. United States Organization (USO)

Program Criteria: *The applicant should be a non-profit U.S. organization which either founded or sponsors the Overseas Institution (OSI) for which assistance is sought. Preferably, the applicant should be tax-exempted under Section 501(c)(3) of the Internal Revenue Code of 1954. The applicant must demonstrate a continuing supportive relationship with the OSI. Evidence of this should be the provision of financial and management support for the OSI.*

This section seeks to gather information about the USO's policies and administration of, and fundraising for, the OSI. Information such as: USO's Board of Trustees, Governors, and administrative office.

3.1. Provide the names, titles, and citizenship of USO's board(s) of trustees and principal officers:

3.2. Brief biographies of the principal officers of the USO board.

Highlight only relevant background/experience (one paragraph per biography). Do not exceed space provided:

3.3. Relationship of the USO with the OSI

Number of paid staff in the U.S.	Percentage of U.S. staff time devoted to the OSI:	Approximate annual person hours of volunteer time spent on OSI's work:

3.4. Describe the role of the USO in the following activities of the OSI.
Provide examples of the USO's specific involvement with the OSI.

Policy setting and management oversight:

Curriculum and program development assistance to the OSI:

Key management and administrative staffing used to support the OSI:

Other program support and technical support provided to the OSI:

3.5. USO's financial and in-kind contribution to the OSI. Specify any direct financial contribution to the OSI in each of the past three years. Include resources other than USO direct contribution mobilized on behalf of the OSI. Describe recent, current, and planned strategic partnership efforts (alumni, alliances with foundations, corporations, universities and others) by the USO and the OSI in the United States, in the host country, and in other areas. Describe how fundraising efforts are managed and indicate how much has been spent on such efforts in each of the past three years.

The Year:

Contribution amount (Please reflect in US Dollars):
Cash: In-kind:

Estimated cost for fundraising efforts:

Funds mobilized from other sources:

Strategic Partnerships:

The Year:

Contribution amount (Please reflect in US Dollars):
Cash: In-kind:

Estimated cost for fundraising efforts:

Funds mobilized from other sources:

Strategic Partnerships:

The Year:

Contribution amount (Please reflect in US Dollars):
Cash: In-kind:

Estimated cost for fundraising efforts:

Funds mobilized from other sources:

Strategic Partnerships:

3.6. Prior ASHA Grants (Last 3 Years):	
Year: Purpose:	
Year: Purpose:	
Year: Purpose:	

3.7. Summary of USO's Most Recent Financial Status:	
USO Budget in USD	
Annual budget of the U.S. office:	
USO Financial Statement	
USO Balance sheet for year ending:	
Current assets:	
Endowments:	
Fixed assets:	
Other assets:	
Total assets:	
Current liabilities:	
Long term liabilities:	
Net assets:	
Total liabilities and net assets:	
USO Income Statement	
USO income statement for year ending:	
Tuition/fee revenues:	
Private grants and donations – U.S.:	
Private grants and donations – Other:	
Public/government grant revenue – U.S.:	
Public/government grant revenue – Other:	
Other income:	
Total revenue:	
Direct expenses:	
Administrative expenses:	
Depreciation expenses:	
Other expenses:	
Total expenses:	
Gain/(Loss):	

Section 4. Overseas Institution (OSI)

Program Criteria: *An instruction program must serve the secondary or higher level and must reflect American educational ideas and practices (education at the elementary school level will not be supported) A school offering a broad-based academic program must include instruction on the history, geography, political science, cultural institutions, or economics of the United States. English should be used in instruction or taught as a second language. However, the foregoing subject matters and language requirements need not apply to a school offering only a specialized course.*

Program Criteria: *An existing OSI must demonstrate competence in professional skills and must exhibit sound management and financial practices. A USO for a new OSI must demonstrate the ability to achieve professional competence and to operate in accordance with sound management and financial practices.*

4.1. OSI information:
Provide the name, titles, and citizenship of the OSI's board(s) of trustees and principal officers:

4.2. History of the OSI:

4.3. Major accomplishments:

4.4. Current objectives:

4.5. Curriculum:

As applicable, insert number of:

Departments:	Courses:	Majors:

English is:
  Prime Language of Instruction   Second Language of Instruction   Taught as a Second Language

Describe levels of instruction and provide details on the curriculum.
- For secondary schools, list courses offered by year.
- For colleges and universities, list majors offered and degrees given.
- For special courses describe relevant non-degree courses offered.
- For hospital centers, describe the scope of training and/or research.
- For all institutions briefly describe any special education or training program that may be offered outside the institution.

Program Criteria: *Institutions are expected to reflect favorably upon and to increase understanding of the United States.*

4.6. How does the OSI serve to demonstrate and promote ideas and practices of the United States in education and/or medicine? Be specific about how American techniques and methods are adopted to serve needs and describe the institution's role in improving educational and/or medical standards:

Program Criteria: *The faculty and staff of a school or a hospital center should include a significant number of U.S. citizens or other persons trained in U.S. institutions who are in residence and teaching at the school or hospital on either a full-time or part-time basis.*

4.7. OSI's Staff:

Total Number of Persons	Admin Full-time	Admin Part-time	Faculty Full-time	Faculty Part-time	Med Staff Full-time	Med Staff Part-time	Maint/ Clerical	**TOTAL**
U.S. Citizens:								
Citizens of Host Country:								
Citizens of Other Countries:								
Total Number:								
Academic Background	Admin Full-time	Admin Part-time	Faculty Full-time	Faculty Part-time	Med Staff Full-time	Med Staff Part-time	Maint/ Clerical	**TOTAL**
U.S. Degrees:								
U.S. Trained:								
Other:								

Briefly describe the criteria used for the selection of faculty and staff:

Program Criteria – *The majority of the users of any institution, e.g. students or patients, must be citizens of countries other than the U.S.*

4.8. Enrollment, selection and cost information (secondary and higher levels only, including hospitals)					
Enrollment					
Period	Degree/Diploma Students Full-Time	Degree/Diploma Students Part-Time	Non-Degree/ Diploma Students Full-Time	Non-Degree/ Diploma Students Part-Time	Student to Faculty Ratio Ex. (10.1)
Last Two Years:					
Current Year:					
Next Two Years:					

Percentage of students that are not U.S. Citizens: This year   Last year

For Degree/Diploma Students, indicate the number of male and female students over the last two years: Male students: Female students: Nationalities represented in Student Body: Female: Male: Number of students using student aid or scholarships:

Annual costs and charges for one Full-Time student (for the year:) Additional comments:	Student	OSI	Totals
Tuition:			
Room and board:			
Other fees:			
Total per Student:			

Average aid amount:

Total student aid or scholarship assistance provided (indicate percentage of student aid or scholarship funds by source).	
From USO:	Host Country Government:
From OSI:	Other sources:

Program Criteria – *The institution must be open to all persons regardless of race, religion, sex, color or national origin. (The foregoing shall not be construed to require enrollment of students of both sexes at an educational institution enrolling either boys or girls only.) Direct assistance may not be used to support any inherently religious activity such as worship, religious instruction or proselytization.*

4.9. Selection – Describe briefly the methods used for selection of students and award of scholarships. Include efforts taken to ensure that the institution is open to all persons without regard to race, color, or national origin:

4.10. Physical Plant – Describe the institution's physical plant, including real estate, the number of buildings, and their use. Indicate any facility or land leased – rather than owned – and explain.

Estimated market value:	Estimated replacement value:	Annual income:	Annual operating costs:	For the year:

FOR MEDICAL FACILITIES ONLY (Sections 4.11, 4.12, 4.13, 4.14)

4.11. If more than one facility, indicate: '1' as the main hospital and '2' as the secondary facility or facilities.				
Average **Monthly** number of In-patients:	Average **Monthly** number of Out-patients:		Persons served by Outreach Program:	
Number of beds authorized:		Rate(s) of occupancy:	Actual cost per bed per day:	Average length of stay (in days):
Main:				
Secondary:				

Program criteria – *A hospital center, in addition to being a treatment facility, must be involved in medical education and research. Programs for post-graduate training of staff in the United States and programs for the exchange of personnel with American institutions will be regarded as evidence of ability to demonstrate American ideas and practices in medicine.*

4.12. Describe medical facility's rate structure and income level. As appropriate, describe medical facility or auxiliary activities providing additional income to the institution.

4.13. Describe managerial structure. (Note any special review committees. Do private physicians have hospital privileges? If so, indicate what kind)

4.14. Describe the institution's major areas and types of research and/or training (formal and non-formal programs.) (e.g. epidemiological, survey, operational research, and other activities. Note the number of persons involved and uses made of research results.)

Program Criteria – *The OSI must be located outside the U.S. and should not be under the control of management of a government or any of its agencies. The receipt of financial or other assistance from a government agency or the observance of national education or medical standards required by the host country does not in itself mean that the OSI is "under the control or management "of such government.*

4.15. U.S. assistance.

Is the OSI benefiting from any USAID or other U.S. Government assistance?   NO   YES

(Indicate amount and type for the past two years.)

Year: Amount: Description:
Year: Amount: Description:

4.16. Specify any assistance to the OSI from the Host Country Government or para-statal entity(ies) in the past two years. Describe services performed for or on behalf of those entities for which the OSI was reimbursed.

Year: Amount: Description:
Year: Amount: Description:

4.17. Summary of OSI's Financial Status:	
OSI Budget:	
Annual budget of the OSI:	
OSI Financial Statement:	
OSI Balance sheet for year ending:	
Current assets:	
Endowments:	
Fixed assets:	
Other assets:	
Total assets:	
Current liabilities:	
Long term liabilities:	
Net assets:	
Total liabilities and net assets:	
OSI Income Statement:	
OSI income statement for year ending:	
Tuition/fee revenues:	
Private grants and donations – U.S.:	
Private grants and donations – Other:	
Public/government grant revenue – U.S.:	
Public/government grant revenue – Other:	
Other income:	
Total revenue:	
Direct expenses:	
Administrative expenses:	
Depreciation expenses:	
Other expenses:	
Total expenses:	
Gain/(Loss):	

4.18. Financial Information Pertaining to the OSI:

Endowments – Indicate size of USO's and/or OSI's endowment (e.g. amount of income earned and percentage return on investment, etc.) Also, explain extent to which endowment is restricted and for what purposes.

a. USO Endowments

b. OSI Endowments

Significant liabilities – Describe significant debt on financial statements and payment terms.

CERTIFICATION
The undersigned, as an official of the applicant organization, certifies that the information in this application is complete and free from misrepresentation and does not knowingly omit any material fact to the information requested.

Name and Title of Person Signing:	Signature:
	Date

NOTE: Failure to provide all requested information in this application form may be cause for rejection. Review the checklist to ensure the application is satisfactorily completed and that all required certifications and attachments are included.

CONTINUATION PAGE

Name of Section:

Section Number:

Section to be continued as follows: