**ATTACHMENT D**

**APPLICANT PRE-AWARD QUESTIONNAIRE**

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| --- | --- |
| **Legal Name of Organization:** |  |
| **Address:** |  |
| **Telephone Number(s):** |  |
| **Website:** |  |
| **Unique Entity Identifier Number:** |  |
| **Name and title of individual completing this questionnaire:** |  |

1. **Organizational Management**

|  |  |
| --- | --- |
| 1. Type of organization: | Private Sector  Local NGO  International NGO |
| 1. Is your organization affiliated with any other organization (governmental, quasi-governmental, public or private sector)? | Yes  No |
| 1. Can you provide copy of articles of incorporation or other documentation which substantiates the organization’s legal registration in Ghana?   If so, please state date of incorporation or legal registration: | Yes  No |
| 1. Organization ownership | Single owner  Family company  Shareholder or investor-owned |
| 1. List of organization’s owners including full names, titles, and contract information |  |
| 1. Does the organization have a Board of Directors? If so, what type of board does your organization have? If not, leave blank. | Board of Trustees  Executive Leadership Board  other, please describe: |
| 1. Is your organization facing any legal action? | Yes  No |

1. **Organizational Capacity**

|  |  |
| --- | --- |
| 1. List management and staff resources, including full names, titles, and contract information, who will contribute substantially to the Fixed Amount Award activity. |  |
| 1. Do you have system in place for HR, accounting, purchasing, production, sales, and cash management?   If yes, please provide detail. | Yes  No |
| 4. Does the organization have formal by-laws or a constitution? | Yes (please provide)  No |

1. **Financial Management**

|  |  |
| --- | --- |
| 1. How often does your organization prepare financial reports?   Please provide the latest report, if any. | Monthly  Quarterly  Annually  All of the above  Other (specific) |
| 1. Does your organization have loans, credit, or shares outstanding? | Yes  No |
| 1. Does your organization currently receive, or has it received in the past, USAID or other donor/grant assistance? | Yes (complete table below)  No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Funding Organization** | **Funding Type (grant, contract)** | **Value (approximate)** | **Dates (period or duration)** | **Contact** |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Reference check**

Please provide 3 references, with contact number/email address, that your organization has worked with over the last 3 years.