

PROJECT BUSINESS PLAN**School Name:**

EMIS nr: _____*Insert school logo/stamp here*

1	Name of the project	
2	Target group	
3	Date of the project	
4	Duration and time	
5	Venue	
6	Total planned Project Cost	

6	Cost breakdown				
	Resources needed <i>(the below list merely serves as a guide to assist ONLY and NOT meant to be prescriptive or limiting)</i>	Frequency <i>(how many times will the resource be needed)</i>	Nr of units <i>(how many of the resource is needed)</i>	Unit cost <i>(what does 1 item of the resource cost)</i>	Total Cost
	Example row only	2 days training	10 learners	R20 per learner	2x10xR20= R400
6.1	Use of venue				
6.2	Catering				
6.2.1	Catering - Full day				
6.2.2	Catering – Lunch				
6.2.3	Coffee /Tea				
6.2.4	Other:				
6.3	Audio/video equipment and technical support				
6.4	Transport costs				
6.4.1	Bus hiring				
6.4.2	School own transport				
6.4.3	Other:				
6.5	Accommodation (if applicable)				

6	Cost breakdown				
	Resources needed <i>(the below list merely serves as a guide to assist ONLY and NOT meant to be prescriptive or limiting)</i>	Frequency <i>(how many times will the resource be needed)</i>	Nr of units <i>(how many of the resource is needed)</i>	Unit cost <i>(what does 1 item of the resource cost)</i>	Total Cost
6.6	Consumables				
6.7	Learner and Teacher support material				
6.7.1	Printing cost				
6.7.2	Paper:				
6.7.3	Textbook purchases:				
6.7.4	Other:				
6.8	Other (Specify)				
TOTAL					

Declaration												
I, the principal of this institution, hereby declare that information provided is correct.												
I, the principal of this institution, understand that the submission of incorrect information or an incomplete application may disqualify my application for funding for the Project.												
I, the principal of this institution, understand that the above application is subject to approval and available funding.												
I, the principal of this institution, provide assurance that the school implements effective, efficient and transparent financial management and internal control systems.												
Signature:												
	Principal				SGB Chairperson							
	Date:				D	D	M	M	2	0	Y	Y