**Chemical Security Improvement Grant (CSIG)**

**Application Checklist**

**Instructions:** Please use this checklist to ensure that your application form is complete and contains all required documentation. Please note that your application will not be reviewed unless all application sections have been completed and all required documents are submitted. Please submit your completed application and supporting documents to: csig@crdfglobal.org

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| **Application:** |
|  | Complete Project Title |
|  | Complete Applicant Information and List of Project Staff and their Roles |
|  | Complete Host Organization Information  |
|  | List of Previous CRDF Global/CSP Funding, if applicable |
|  | Identified Expected Support for CSIG Project from Host Institution and/or non-CRDF Global Sources |
|  | Complete Project Description |
|  | List of Project’s Intended Contributions to Chemical Security |
|  | Complete List of Hazardous Chemicals that will be secured by the CSIG |
|  | Identified Expected Outcome and Sustainability Potential |
|  | Developed Proposed Project Timeline |
|  | Supporting Documentation – i.e. photos of chemical facility, institutional support documents |
| **Budget:** |
|  | List of Labor Costs, if applicable  |
|  | List of Equipment, Software, Material and Supply Cost |
|  | Identified Other Costs, if applicable  |
| **Other Items:** |
|  | Three Vendor Price Quotes for Each Piece of Equipment listed in the Budget |
|  | Curriculum Vitae (CV) for each Project Team Member |
|  | Copy of the passport or national ID face page for each team member on the project |

**Chemical Security Improvement Grant (CSIG)**

**Application Form**

**Instructions:** Proposals may be completed in any preferred language. Completing the application in a language other than English will not negatively affect your opportunity of receiving a grant, but due to translation, doing so will add around two weeks to the response timeline for your application.

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| 1. **General Project Information**
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| **Project Title**  |  |
| **Amount Requested**  |  |
| **Project Duration** |  |

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| **B. Applicant Information** |
| **Job Title/Position** |  |
| **First Name** (as it appears on passport) |  |
| **Last Name** (as it appears on passport) |  |
| **Country of Citizenship** |  |
| **Name of Institution** |  |
| **Division/Department** |  |
| **Address of Institution** |  |
| **Applicant Contact Information** |
| **Phone Number** |  |
| **Fax Number**  |  |
| **Email Address** |  |

Please list all other staff members who will be involved in this project.

|  |  |  |
| --- | --- | --- |
| **Name, Job Title/Position** | **Specific Role in the Project** | **Institution** |
|  |  |  |
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If there aren’t enough fields provided, please feel free to add additional rows if necessary.

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| **C. Host Organization Information** |
| **Organization Name** |  |
| **Division/Department** |  |
| **Title & Name of Person in Charge of Authorizing this Arrangement:** |  |
| **Town/City** |  |
| **Country** |  |
| **Postal Code** |  |
| **Host Contact Information** |
| **Phone Number** |  | **Fax Number** |  |
| **Email Address** |  |
| **Website** (if applicable) |  |
| **Institution Name and Address where equipment will be installed and used:** |  |

**D. Previous CRDF Global Funding**

* **Have you previously submitted a CSIG application? (Please check your answer)**
1. [ ] No
2. [ ] Yes (fill in information below)

Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested equipment or funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Have you previously received funding from CRDF Global or participated in a CRDF Global training? (Please check your answer)**
1. [ ] No
2. [ ] Yes. (fill in information below)

Number of times you received funding or participated in training: \_\_\_\_\_\_\_\_\_\_\_\_

Type and date of training/funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Please describe how you heard about CRDF Global and/or CSIG awards.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E. Expected Support for this Project from Host Institution and/or other Non-CRDF Global Sources**

Add additional rows if necessary

|  |  |
| --- | --- |
| **Name of Institution giving Support:** |  |
| **Amount of Support:** | **In-Kind\***  |  | **Cash** |  |
|  |  |

\****In-Kind Contributions are contributions of goods or services, not cash – i.e. computers, software, furniture, storage space, mail services, etc.***

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| **Signature of Applicant:** |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Signature of Head in Charge of Authorizing Arrangement:** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**F. Summarize the Proposal**

Please provide a brief description of the proposed chemical security improvement project and summarize what this project will achieve. The following are important questions that should be addressed in your answer:

* What institution(s) will be involved or benefit from your proposal?
* What are the proposed components included in your CSIG application? What are you asking for?
* What are the chemical security objectives of your proposal?
* What is your role in the project?
* Do you have support and the required approval to implement the project at each participating institution?

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| **Response:** |
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**G. Describe the Need for Funding**

Please identify which chemical resources can and will be protected by this CSIG grant. The following are important questions that should be addressed in your answer:

* What is the role of your institution and enterprise? Specifically, what chemistry-related functions (such as research, distribution, transportation) are you responsible for?
* Describe the current state security systems within your institution or enterprise.
* What weaponizable, dual-use, or dangerous chemicals will this CSIG proposal secure?

Has your institution or enterprise experienced any chemical security incidents in the past (such as theft, vandalism, or unauthorized access)?

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| **Response:** |
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**H. Contribution to Chemical Security**

Please describe the **chemical security** impact of your proposal. Strong answers will explain the following as thoroughly as possible:

* Describe the current state security systems within your institution or enterprise.
* Please describe any perceived vulnerabilities and areas for improvement (related to chemical security) at your institution or in your enterprise.
* Please describe in detail how EACH item in your CSIG proposal will mitigate or remedy the threats and vulnerabilities mentioned above.
* Describe how the overall state of information and cyber security at your institution after your project is completed.

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| **Response:** |
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**I. Expected Outcome and Sustainability Potential**

Please explain how your institution plans to ensure sustainable impact by maintaining security upgrades or procedures after the grant is complete. Strong answers will explain the following as thoroughly as possible:

* What is your institution’s long-term goals for chemical security and how will this project help you reach these goals?
* Do you have committed, long-term financial support for maintenance from your institution?
* What is your institution or enterprises’ plan for maintenance? Please provide a detailed equipment maintenance plan, if applicable.

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| **Response:** |
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**J. List of Hazardous Chemicals\***

Please identify the hazardous chemicals that will be secured through this project.

***\*****Priority will be given to those chemicals listed on the* [*OPCW Schedules of Chemicals I, II and III*](http://www.opcw.org/chemical-weapons-convention/annexes/annex-on-chemicals/)or [*Australia Group Common Control List*](http://www.australiagroup.net/en/precursors.html)or [*DHS Chemicals of Interest*](https://www.dhs.gov/sites/default/files/publications/appendix-a-to-part-27-508.pdf).

|  |
| --- |
| **Please list all hazardous chemicals here under the applicable column heading.** |
| **OPCW Schedule I****Chemicals** | **OPCW Schedule II****Chemicals** | **OPCW Schedule III****Chemicals** | **Australian Group List Chemicals** | **DHS Chemicals of Interest** | **Other** |
|  |  |  |  |  |  |

**K. Proposed Timeline**

Please list each step/task for your project and the anticipated number of weeks or months to complete each step/task. The length of the project should not exceed six (6) months.

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| --- | --- |
| Taking photos of all places where the equipment will be installed and submitting them to CRDF Global  |  |
| Reviewing pre-award documents received by CRDF Global*(CRDF Global expects pre-award documents review to take up to three weeks, please inform us if this step is lengthy at your institution)* |  |
| Length of time to receive signature of the agreement once pre-award documents are approved |  |
| Length of time to order, receive and install the entire list of equipment |  |
| Install equipment and send photos and/or videos of the final product |  |
| **IF APPLICABLE:**Collecting CVs and personnel information of all staff members who will be trained on equipment and risk management best practices, if the project includes training |  |
| Review process at CRDF Global | 45 days |
| Time to train staff after receiving review feedback |  |
| Submit equipment confirmation forms and final report detailing project challenges and accomplishments |  |

**L. Supporting Documentation**

Please attach documents in support of this chemical security improvement application to your submission email, such as:

* Equipment information or justification
* Letters of support from your institution
* Photos of your facility or laboratory
* Three vendor price quotes per requested equipment

**Appendix A - CSIG Project Budget Instructions**

**Please complete the separate budget document and submit it with your application.**

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| **A. Equipment, Software, Materials and Supplies** |
| Please list each piece of individual equipment, software, supplies and materials (one per line-item) you are requesting and include:* Price estimate in United States Dollars (USD) including value-added tax (VAT), delivery costs, and installation costs.
* Description of equipment that includes the make and model of each item.
* Expected country of purchase. If possible, applicants are encouraged to utilize local in-country vendors.
 |
| **Please submit three vendor price quotes for each piece of equipment you list in your budget.**Each price quote or bid usually comes in the format of a word document, invoice, PDF or printed or handwritten document that a vendor prepares for you, and has the costs itemized from each material, to VAT and installation costs. |
| **B. Other Costs**Please list any extra costs outside of labor and equipment expenses that may be associated with the implementation of this project.  |