****Local Project Support Program 2024/2025****

****- Arts and Culture -****

****Application Form****

To: Director

The Japan Foundation, Budapest

Date:

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| **Applicant**  |
| Name of Applicant: |
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| Address:Tel: Fax: Email:  |
| Website: | Year of Establishment: |
| Name of the Official Representative of Applying Organization: **(Signature:)**(In block letters) (Title within organization)Tel:Email: |
| Name of Project Director (Person in Charge of Project)**(Signature:)** (In block letters) (Title within the organization)Tel: Fax: Email:*\* The Official Representative and the Project Director must be different persons.* |
| **Project** |
| Title of the Project: |
| Type of the Project | a. Performances, exhibitions, conferences, seminars, competitions, and lectures |
| b. Production and distribution of literature |
| c. Other cultural exchange projects |
|  |
| *\* Please circle one of the above.* |
| Date(s) :　　　　　　　　 　～　　　 (day/month/year) 　　　　　　 　(day/month/year) | Number of events/performances*\*Project type a, c* |
| Venue(s) (Name, address and capacity):*\*Project type a, c* |
| Estimated number of attendance: (to be confirmed again in the Final report)*\*Project type a, c* |
| Purpose of the Project: |
| Description of the Project (Please attach prospectus or any materials related to the project, if any.) |
| PR plan of the project: |
| Method of evaluation of the project (e.g. questionnaire, number of media appearances etc.): |
| Amount of grant requested and the item(s) against which the grant is to be used:(Amount) HUF / EUR / Other ( )(Items\*)*\*Every item must be reflected in the Budget Form as well.* ­ |
| Support from Other Institutions Yes / No | Please describe the support that have been applied or already authorized(Name of Institutions) (Type of Support, Requested Amount of Support) |

\*Please attach the Budget Form (Estimate).