附件3：

官渡区2023年度未成年人关爱保护项目申报书

项目名称：

项目实施地：

申报单位：

填表日期：

填 表 说 明

一、本申报书为项目实施的格式合同，申报单位必须保证其真实性和严肃性。项目一经立项，合同即告成立。

二、项目编号由主办单位负责填写。

三、申报书各项内容按照说明填写，为保证统一规范，请勿对格式进行修改，填入内容文字用仿宋GB2312小四字体，行间距为固定值20磅，填写内容请勿超过要求字数。

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| **一、承接结构信息** | | | | | | | | | | | | | | | | | | | | |
| **承 接 单 位** | | |  | | | | | | | | | | | | | | | | | |
| **业 务 主 管 单 位** | | |  | | | | | | | | | | | | | | | | | |
| **统一信用代码** | | |  | | | | | | | | | | **成 立 时 间** | |  | | | | | |
| **机构负责人姓名**  **及职务** | | |  | | | | | | | | | | **机构联系电话** | |  | | | | | |
| **机构通讯地址** | | |  | | | | | | | | | | | | | | | | | |
| **上年度年检结论** | | |  | | | | | | | | | | **机构评估等级** | |  | | | | | |
| **有 无 免 税 资 格** | | |  | | | | | | | | | | **机构是否有财务手册** | |  | | | | | |
| **机构服务领域** | | |  | | | | | | | | | | | | | | | | | |
| **项目期内已承接的项目数量** | | |  | | | | | | | | | | | | | | | | | |
| **机构开户行信息** | | | | | | | | | | | | | | | | | | | | |
| **户 名** | | |  | | | | | | | | | | | | | | | | | |
| **开 户 账 号** | | |  | | | | | | | | | | | | | | | | | |
| **开 户 行** | | |  | | | | | | | | | | | | | | | | | |
| **项目负责人基本信息** | | | | | | | | | | | | | | | | | | | | |
| **姓名** | **性别** | **职务** | | | | | **手机** | | | | **电 子 邮 箱** | | | | **学历及专业** | | | **专业资质** | | |
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| **同类项目实施经验** |  | | | | | | | | | | | | | | | | | | | |
| **项目执行机构及团队成员情况** | | | | | | | | | | | | | | | | | | | | |
| **项目执行团队** | **姓名** | | | | **性别** | | | **年龄** | | **学历/专业/资质** | | | **职务与经验介绍** | | **项目具体分工（并标明是否常驻人员）** | | | | **联系电话** | |
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| **承接单位机构简介（**100字内**）** |  | | | | | | | | | | | | | | | | | | | |
| **二、项目详细信息** | | | | | | | | | | | | | | | | | | | | |
| **项目名称** |  | | | | | | | | | | | | | | | | | | | |
| **项目实施地点** |  | | | | | | | | | | | | | | | | | | | |
| **项目目标人群** |  | | | | | | | | | | | **预计受益人数** | | | |  | | | | |
| **项目申报**  **类别** |  | | | | | | | | | | | **项目实施周期** | | | |  | | | | |
| **项目总 预算** |  | | | | | | | | | | | | | | | | | | | |
| **项目背景** | **1.项目要解决的社会问题？**  **2.社会问题的产生原因？**  **3.解决该问题的必要性？** | | | | | | | | | | | | | | | | | | | |
| **目标人群描述** | 1. **界定项目目标人群的基本特征、数量**   **2.目标人群基本需求分析** | | | | | | | | | | | | | | | | | | | |
| **项目实施基础**（项目实施前期开展的与项目相关的支撑及取得的成效，200字内） |  | | | | | | | | | | | | | | | | | | | |
| **本年度项目可达成的具体目标**（符合“SMART”原则） | **具体目标1：** | | | | | | | | | | | | | | | | | | | |
| **具体目标2：** | | | | | | | | | | | | | | | | | | | |
| **具体目标3：** | | | | | | | | | | | | | | | | | | | |
| **具体目标4：** | | | | | | | | | | | | | | | | | | | |
| **项目实施策略** |  | | | | | | | | | | | | | | | | | | | |
| **项目具体实施计划** | | | | | | | | | | | | | | | | | | | | |
| **对应的具体目标** | **活动名称** | | | **活动时间及地点** | | | | | **活动计划**  （包括活动的内容、形式、参与人员及人数） | | | | | | | | **投入**  （包括资金、物资、志愿者、设备、用具等） | | | **成果** （带给目标人群的变化包括其接受服务小时数、其态度、行为、价值观等方面的变化） |
| 具体目标1 |  | | |  | | | | |  | | | | | | | |  | | |  |
| 具体目标2 |  | | |  | | | | |  | | | | | | | |  | | |  |
| 具体目标3 |  | | |  | | | | |  | | | | | | | |  | | |  |
| 具体目标4 |  | | |  | | | | |  | | | | | | | |  | | |  |
| **项目的亮点**（包括项目采用的先进工作方法，项目创新性、示范性等） |  | | | | | | | | | | | | | | | | | | | |
| **项目的沟通机制** |  | | | | | | | | | | | | | | | | | | | |
| **项目具体目标达成对应的评估基线** | | | | | | | | | | | | | | | | | | | | |
| **对应具体目标的评估指标** | | | | | | **预计可达到的水平（可量化）** | | | | | | | | **该指标在项目中得以实现的表现方式** | | | | | | |
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| **三、项目经费预算** | | | | | | | | |
| **资金来源** | **资金种类** | | | | | **金额（元）** | | |
| **申报资金** | | | | |  | | |
| **配**  **套**  **资**  **金** | 自有资金 | | | |  | | |
| 社会募集资金 | | | |  | | |
| 其他资金 | | | |  | | |
| **总计** | | | | | |  | | |
| **一、申报资金支出（元）** | | | | | | | | |
| **序号** | **项目活动费用** | **用途** | **单价** | **单位** | **数量** | **数量说明** | **总额（元）** | **备注** |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | 社工服务费 |  |  |  |  |  |  |  |
|  | 税费 |  |  |  |  |  |  |  |
| **合计（元）** | | | | | | |  | |
|  | | | | | | | | |
| **二、配套资金支出（元）** | | | | | | | | |
| **序号** | **项目活动费用** | **用途** | **单价** | **单位** | **数量** | **数量说明** | **总额（元）** | **备注** |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | XXX活动 |  |  |  |  |  |  |  |
|  | 社工服务费 |  |  |  |  |  |  |  |
|  | 税费 |  |  |  |  |  |  |  |
| **合计（元）** | | | | | | |  | |
| **注：** | 1.预算表格可根据实际情况增减或减少“行”。  2.志愿者补贴，原则上按照每人不超过100元/天的补贴标准编报。  3.涉及到社工服务费用需要注明人员的工作量和具体事项，专家和讲师等专业人员请在备注栏注明其专业资质。  4.项目经费原不得用于购买固定资产。 | | | | | | | |

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| **四、项目承诺及主办方意见** | |
| 申报单位承诺 | 我单位保证项目申报材料真实、合法、有效，已制定项目实施方案，确保项目在规定时限内如期完成，确保资金的合理合法及有效使用。将按法律、法规有关规定，接受项目监管和绩效评估，并承担相应责任。  法定代表人或委托人签字： （单位盖章）  年 月 日 |
| 街道或社区意见 | 单位（盖章）：  年 月 日 |
| 民政局意见 | 单位（盖章）：  年 月 日 |