**CONTINENT:**

**DATE:**

**TOTAL AMOUNT REQUESTED:**

**1.0 ACTIVITY DETAILS**

<Continent name> requests funding for the following activities in the table below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **ACTIVITY** | **FUNDING TO CONTINENT**  **(EUR/USD)** | **FUNDING TO ORGANISER/ VENDOR**  **(EUR/USD)** | **ACTIVITY ON FIDE’S PRIORITIES LIST**  **(Yes/No)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**N.B. Requests for funding for specified activities to be done at least 2 weeks in advance.**

**2.0 FIDE Priorities**

**Core**

* Chess in Education
* Capacity Building
  + Technical Training of arbiters, organisers, chess trainers, school chess trainers
  + Professional and skills development of Chess Officials in areas such as: Governance, Project management, Planning and Financial Management, Marketing and Promotion
* Social Projects e.g. work with prisons, refugees, vulnerable citizens, etc…
* Continental chess events (e.g. continental championships ( excluding school events), zonals)
* Training programmes and activities for female chess players
* Activities related to the preservation of Chess history
* Special Event for the promotion of chess and its social impact.
* Chess Equipment

**Other**

* Funding for Travel of Continental President (Limited and approved on a case by case basis)
* Efforts to secure sponsors for the Continental Programmes
* Lobbying efforts for the inclusion of chess into Continental Olympic Games and other regional sporting events.

**2.0 BUDGETS**

Please enclose detailed budgets/invoices for each activity stated in 1.0.

|  |  |  |
| --- | --- | --- |
| **No.** | **ACTIVITY** | **Budget enclosed**  **(Yes/No)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**2.0 BANK INFORMATION - Continent**

|  |
| --- |
| Beneficiary Account Number:  Beneficiary Name:  Beneficiary Address:  Beneficiary Bank:  Beneficiary Bank Address:  SWIFT CODE:  IBAN (If applicable):  Intermediary Bank Name (If applicable):  Intermediary Bank Swift Code (If applicable):  Intermediary Bank Address ( If applicable): |
|  |

**Other (Organiser/Vendor)**

|  |
| --- |
| Beneficiary Account Number:  Beneficiary Name:  Beneficiary Address:  Beneficiary Bank:  Beneficiary Bank Address:  SWIFT CODE:  IBAN (If applicable):  Intermediary Bank Name (If applicable):  Intermediary Bank Swift Code (If applicable):  Intermediary Bank Address ( If applicable): |
|  |

**3.0 Payments**

Each request will be reviewed and payments for the approved funding amounts will be executed by FIDE within 2 weeks of receipt confirmation of request.

FIDE will provide a reason for each request where the approved level of funding differs from the amount requested by the Continent.

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

**Authorised Signature**

**<Continental Body>**