Smile Together Partnership

**between and the Work Together Foundation**

**Cooperation Proposal**

|  |
| --- |
| Documents required1. ‘Smile Together Partnership’ cooperation proposal
2. Introduction of the corresponding institution (Including proof of the institution’s economic independence/soundness, expenditures and other financial records for the last three years)
3. Resume of the personnel in charge, a copy of Proof of Employment (may be in any form applicable)
4. Certificate of Corporation Registration or a Certificate of Non-Profit Organization, and Certificate of Enterprise or a copy of its registration number (※ This can be omitted if the institution has not yet been established)
 |

Last Edited on June, 2016

|  |
| --- |
| Before you write this proposal, please read1. The cooperation proposal, the interim report, and the results sharing pare correlate with each other closely to follow up your business flow of the year and the future.
2. Please write in sentences when you see “;” on the paper, write in phrases or key words when you see “-“
3. ‘This year’ means the year you work with the STP fund according to this proposal
4. We hope this forms help you to think about your business thoroughly while writing up each form
 |

Cover Letter from the representative *within 1 page*

|  |
| --- |
|  |

|  |
| --- |
| **Information about the Applicant Institution** |
|  | Head Office | Office in Korea(Optional) |
| Legal Name of Institution |  |  |
| Established Year |  |  |
| Representative | Name |  |  |
| ID No. |  |  |
| Registration Information of Institution | □ Yes, we have ↓ □ None

|  |
| --- |
|  |
| Registration No. |
|  |
| Entity Type |

 | □ Yes, we have ↓ □ None

|  |
| --- |
|  |
| Registration No. |
|  |
| Entity Type |

 |
| Office Address |  |  |
| Office Phone No. |  |  |
| Website |  |  |
| Person to Contact | Name |  |  |
| Position |  |  |
| Direct Phone No. |  |  |
| E-mail |  |  |
| **Description of the Proposed Social Enterprise** |
| **Social Enterprise****Name** |  |  |
| Field Location | *Region, Country* | Funding Period | *MM.YYYY – MM.YYYY* |
| Address |  |
| Total Project Budget in this year | In USD | No. of years You have received STP funding | 1st year |
| Funding AmountRequested (Yearly base) | In USD | Direct Funding for Impoverished Children | In USD |
| I hereby apply for the Smile Together Partnership Fund offered by the Work Together Foundation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature of Applicant |  | Print Name |  | Date |

 |

**Project Outline *within 1 page***

|  |  |
| --- | --- |
| **Social Enterprise****Name** |  |
| **Mission** |  |
| **Vision** |  |
| **Goal of the year** |  |
| **Social Issues that are to be Addressed** |  |
| **Outline of the Enterprise** |  |
| **Competitiveness of the Enterprise** |  |
| **Expected Outcome of the Enterprise and its Influence** |  |
| **Why it Wishes to Cooperate with the Smile Together Partnership** |  |

**1. Background of the Organization**

**1) What is the background of the local community?**

**;**

**2) What is the main social problem the organization attempts to solve?**

**;**

**3) Who is faced with this problem?**

**;**

**4) How serious (or how big) is the problem?**

**;**

**5) What are the measures that the organization has taken in the past to alleviate the problem described above?**

**;**

**6) Current Financial Statement**

**;**

|  |  |
| --- | --- |
| **Account** | **Based on the end of last two years** |
| **Operating Income** |  | *2014* | *2015* |
| *Sales* |  |  |
| *Donation* |  |  |
| *Project from the third parties* |  |  |
| *Etc.* |  |  |
| **Assets** | *Deposit money of the rented property, vehicles, etc* |
| **Debts** | *Unpaid payments* |

**2. Core Competencies of Running a Social Enterprise**

*Please describe what kinds of projects will be carried out and why you think that the enterprise will be successful*

**1) Business Model & Value Chain**

**;**

**2) Competitiveness**

**;**

**(1)…;**

**(2)…;**

**(3)…;**

**3) Market Situation & Marketing strategy**

**;**

**4) Other Factors You Will Attain for the Success of the Business**

*Please state the milestone tasks required for the sustainability of the organization as agreed upon with the Work Together Foundation during the due diligence*

**3. This Year Plans for Running the Social Enterprise**

|  |
| --- |
| **Current Situation of the Social Enterprise***Please describe the current phase of operation that the enterprise is in and what further capacities it needs to secure in order to complete its goals successfully.* |

**1) Governance of the Social Enterprise**

\* Please write how people engage in this business and work efficiently

**;**

**2) Research & Development Investment**

**;**

**3) Market Research & Marketing Activity**

**;**

**4) Management System**

\* Please write if you have any upgrade plans for overall management

**(a) Inventory**

**;**

**(b) Accounting**

**;**

**(c) Human Resources Development**

**;**

**(d)** you can add more, if you have more items to mention

**5) Other Activities You Are Planning for the Sustainability of the Business**

**;**

6) **Timeframe of Operation (according to mentioned plan above)**

Complete the chart below showing the operations that took place each month. (Insert“O”)

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Operation** | **Oct** | **Nov** | **Dec** | **Jan** | **Feb** | **Mar** | **Apr** | **May** | **Jun** | **Jul** | **Aug** | **Sep** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

7) Quarterly modified Profit and Loss Statement of this year

\* The table's contents can be altered according to the social enterprise’s needs

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Contents** | **First****Quarter** | **Second****Quarter** | **Third****Quarter** | **Forth****Quarter** | **A year****Total** |
| **Dates** | **~ 31,Mar.** | **~30,Jun.** | **~30,Sep.** | **~31,Dec.** |  |
| **Total****Revenue** | Sales |  |  |  |  |  |
| Smile Together Partnership Fund |  |  |  |  |  |
| Funds from third parties |  |  |  |  |  |
| Fill out more items if necessary |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total (A)** |  |  |  |  |  |
| **Total****Spending** | Labor costs |  |  |  |  |  |
| Operation Fees |  |  |  |  |  |
| Research and Development |  |  |  |  |  |
| Fill out more items if necessary |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total (B)** |  |  |  |  |  |
| **Net Profit (A-B)** |  |  |  |  |  |

**4. Master Plan of the Social Enterprise**

**1) Three-Year Roadmap to achieve the Goal with STP fund**

**;**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **First Year** | **Second Year** | **Third Year** |
| **Goal as a Enterprise** | **-****-****-** | **-** | **-** |
| **Social Objectives** | **-****-****-** | **-** | **-** |

**2) Plans for Independent Operation after the Completion of the STP Funding Period including final goal**

**;**

3) Estimated Profit and Loss Statement

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Contents** | **End of last year** | **First Year** | **Second****Year** | **Third****Year** | **Fourth****Year** | **Fifth****Year** |
|  |  | **STP funding period** |  |  |
| **Total****Revenue** | Sales |  |  |  |  |  |  |
| Smile Together Partnership Fund |  |  |  |  |  |  |
| Donations |  |  |  |  |  |  |
| Funds from third parties |  |  |  |  |  |  |
| Fill out more items if necessary |  |  |  |  |  |  |
| **Total (A)** |  |  |  |  |  |  |
| **Total****Spending** | Labor costs |  |  |  |  |  |  |
| Operation Fees |  |  |  |  |  |  |
| Research and Development |  |  |  |  |  |  |
| Fill out more items if necessary |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Total (B)** |  |  |  |  |  |  |
| **Net Profit (A-B)** |  |  |  |  |  |  |

\* Remarks

**5. Plans for Promoting Social Impact**

1. **Efforts to be Connected to Local Community and Contribute on the Local Community with Social, Cultural, Environment Factors**

\* Encouraging participation from local residents and local partners

**;**

|  |  |  |
| --- | --- | --- |
| **Contents** | **Measurement tools** | **Objectives of this year in number** |
|  |  |  |
|  |  |  |

1. **Fostering Local Youth Leadership**

\* Encouraging local youth to work as leaders of community development projects and social enterprises even expatriates’ cooperation development projects end

**;**

|  |  |  |
| --- | --- | --- |
| **Contents** | **Measurement tools** | **Objectives of this year in number** |
|  |  |  |
|  |  |  |

**3) Direct Support to Impoverished Children**

**;**

|  |  |  |
| --- | --- | --- |
| **Contents** | **Measurement tools** | **Objectives of this year in number** |
|  |  |  |
|  |  |  |

\* We are interested in your impact on employment, the quality of life of impoverished children, the fostering of local youth leadership, etc., and we will ask about these in the result sharing paper. Please refer to the ‘5.Quantitative Outcomes of the Social Enterprise’ on the Results Sharing Paper, and research it in advance.

6. Cooperation Proposal for the Smile Together Partnership

1) Plans for Capital/Financial Management

1-1) Revenue (Funding)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Total Budget (100%) | Funding Amount | Timeframe for Disbursement | Funding Entity | Remarks |
|  |  | ( %) |  |  |  |
|  | ( %) |  |  |  |
|  | ( %) |  |  |  |

1-2) Expenditure (Budget)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Classification | Category | Item | Details | STP Fund | Non-STPFund | Total | Remarks |
| Labor Costs |  |  |  |  |  |  |  |
| R&D |  |  |  |  |  |  |  |
| Operation  |  |  |  |  |  |  |  |
| Social Contributions |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |

2) Non-Financial Support Needs from the STP

7. Plans for Promotion of the Smile Together Partnership