



GLOBAL GRANT APPLICATION TEMPLATE

The following pages outline the questions you will be asked on the online global grant application. You can use this document for planning purposes. Find the actual grant application at www.rotary.org/grants.

Step 1: Basic information

What's the name of your project?

Project Drishti to provide Assistive Devices for the Blind/Visually Impaired

What type of project are you planning? (humanitarian project, vocational training, scholarship)

All global grants support activities within Rotary's areas of focus.

Humanitarian – Enable, Educate and Empower the Blind/Visually impaired with an assistive device

Select the primary host and international contacts for this project.

The primary host contact lives in the country where the project, training, or study will take place. The primary international contact lives in another country. Both contacts will be responsible for all grant-related correspondence and reporting to The Rotary Foundation.

Step 2: Committee members

The committee will include at least three members from the host sponsor and three members from the international sponsor.

Who will serve on the grant's host committee?

Who will serve on the grant's international committee?

Do any of these committee members have potential conflicts of interest? If so, please briefly explain.

A conflict of interest is a relationship through which an individual involved in a program grant or award causes benefit for such individual or such individual's family, acquaintances, business interests, or an organization in which such individual is a trustee, director, or officer.

No such conflicts exist

Step 3: Project overview

Tell us a little about your project. What are the main objectives of the project, and who will benefit from it?

We're only asking for a general idea of the project. Try to be as concise as possible here. We'll ask you for details later in the application.

The objective of the project is to provide an assistive device to the visually impaired. The device uses technologies such as Artificial Intelligence, Machine learning. The device tells them in voice the things around them, reads books for them, identifies face and helps them to walk safely. It opens world of opportunities for millions of blind and visually impaired.

Step 4: Area of focus

Which area of focus will this project support?

Select at least one area. Note that we'll ask you to set goals and answer questions for each area of focus you select.

- Peacebuilding and conflict prevention
- Disease prevention and treatment
- Water, sanitation, and hygiene
- Maternal and child health
- Basic education and literacy
- Community economic development
- Environment

Step 5: Measuring success

Which goals of this area of focus will your project support?

We'll ask you questions about the goals you choose, and at the end of the project, you'll report on your results for each goal. Each area of focus has its own set of goals. Select only the goals that your project will address.

1. Enable the visually impaired to read any book in any language (empowerment)
2. Navigate around the obstacles safely (safety)
3. Identify objects around them (independence)

How will you measure your project's impact?

Use only measures that are clearly linked to your goals and will demonstrate the project's impact on participants' lives, knowledge, or health. Find tips and information on how to measure results in the [Global Grant Monitoring and Evaluation Plan Supplement](#). You need to include at least one standardized measure from the drop-down menu as part of your application. (Add rows as needed.)

Measure	Collection Method	Frequency	Beneficiaries
Number of benefiting school-age students	Direct observation, interviews form participants	Weekly	Students
Number of intuitions participating in the program	Review of records and reports	Bi-weekly	Facilitators
Number of adults receiving training	Focus groups and surveys	Bi-weekly	Professionals

Do you know who will collect information for monitoring and evaluation?

If yes, please provide the name and contact information for that person or organization and briefly explain why this person or organization is qualified for this task. If no, please tell us how you plan to find a person or organization to complete this task.

Names and contact information who will collect information for monitoring and evaluation

Ms Sheela Nagendra SHG Technologies, Bangalore Tel : 9620638372

Dr Vijayalakshmi Aravind Eye Hospitals Tel: 9486833493

Ms Flora Aravind Eye Hospital Tel: 9003896185

Dr. Devi Udayakumar Voluntary Health Services Tel: 9962324654

Dr Soniya Srivatsava Dr Shroff's Charity Eye Clinic Tel: 9818169160

The above are qualified Ophthalmologists and Rehabilitation specialists at the following hospitals.

Arvind Eye Hospitals- Madurai, Voluntary Health services, Chennai, Sankara Nethralaya, Chennai and a few NGO's involved with the cause of visual impairment and Low Vision are qualified to provide information. All these hospitals have Low Vision and Rehabilitation centers. The NGO's which collaborate with these eye hospitals and health centers provide information on the outcome of using the device and get inputs for improvisation. At SHG technologies our Operations and User experience management team records this information and provides input to the technical team for product improvement to meet growing needs of different categories of users distributed across different geographies.

Step 6: Location and dates

HUMANITARIAN PROJECT

Where and when will your project take place?

The project will take place in Tamil Nadu, India. Specifically in Chennai suburban areas.

Sept 2022 – Feb 2023

VOCATIONAL TRAINING TEAM

Give us some information on your team or teams. (Add rows as needed.)

Team name	Type	Training location	Departure - Return
Not Applicable			

SCHOLARSHIP

What are the candidate's estimated travel dates?

Not Applicable

Step 7: Participants

VOCATIONAL TRAINING TEAM

In this section team leaders and at least two other members must be added to each team created.

The following documents need to be uploaded for each member: their CV and [Vocational Training Team Member Application](#). Team itineraries must also be included in this step. It is the team leader's responsibility to gather, review, and upload all member documents.

The Vocational Training Team Member Application includes the following questions:

How does your educational and professional experience relate to the selected area of focus?

Not applicable

What is your role in this training? Describe how you will participate.

Not applicable

Cooperating organizations (optional)

Provide the name, website and location of each cooperating organization.

A cooperating organization can be a nongovernmental organization, community group, or government entity. Please attach Rotary's [memorandum of understanding](#) that's signed by a representative of the organization. (Add rows as needed.)

Name	Website	Location
SHG Technologies, Pvt. Ltd	www.shgtechnologies.in	Chennai and Bangalore

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Why did you choose to partner with this organization and what will its role be?

SHG Technologies Pvt Ltd developed this assistive device for the blind and Visually impaired. They have a structured training program to impart training to the trainers at the Rehabilitation centers and Low Vision Clinics

PARTNERS (OPTIONAL)

Partners may include other Rotary clubs, Rotaract clubs, Rotary Community Corps, or individuals.

List any other partners that will participate in this project.

Rotary Club of Madras East – They have implemented the projects benefiting hundreds of visually impaired

VOLUNTEER TRAVELERS (OPTIONAL)

A grant for a humanitarian project can pay for travel for up to two people who will provide training or help implement the project if the necessary skills are not available locally.

Provide name, email of traveler(s).

Mohamed Ibrahim, ibrahim@smarthealthglobal.in

Describe this person’s role in the project.

Chief Trainer: Imparts training to the Trainers at the Rehabilitation centers and Low Vision clinics at Eye Hospitals

SCHOLARSHIP CANDIDATE

Provide name and email for the scholarship candidate. Upload the candidate’s admission letter.

Not Applicable

ACADEMIC INSTITUTION

Provide the name and address of the academic institution.

Not Applicable

ROTARIAN PARTICIPANTS

Describe the role that host Rotarians will have in this project.

Describe the role that international Rotarians will have in this project.

Step 8: Budget

What local currency are you using in your project's budget?

The currency you select should be what you use for a majority of the project's expenses.

What is the U.S. dollar (USD) exchange rate?

What is the budget for this grant?

List each item in your project's budget. Remember that the project's total budget must equal its total funding, which will be calculated in step 9. Project budgets, including the World Fund match, must be at least \$30,000. (Add rows as needed.)

#	Category*	Description	Supplier	Cost in local currency	Cost in USD
Total budget:					

*Possible categories: Accommodations, Equipment, Monitoring/evaluation, Operations, Personnel, Project management, Publicity, Signage, Supplies, Training, Travel, Tuition

Supporting documents

Upload any documents, such as price bids or pro forma invoices, to substantiate the listed expenses.

Step 9: Funding

Tell us about the funding you've secured for your project.

We'll use the information you enter here to calculate your maximum possible funding match from the World Fund. List all of your funding, including cash contributions and District Designated Funds (DDF). (Add rows as needed.)

#	Source	Details	Amount (USD)	Support*	Total

*Whenever cash is contributed to the Foundation to help fund a global grant project, an additional 5 percent is applied to help cover the cost of processing these funds. Clubs and districts can receive Paul Harris Fellow recognition points for the additional expense.

How much World Fund money would you like to use on this project?

Step 10: Sustainability

Sustainable projects provide long-term solutions to community problems – solutions that community members themselves can support after grant funding ends. Your answers to the questions below will help us understand the components of your project that will make it sustainable.

HUMANITARIAN PROJECTS – PROJECT PLANNING

Describe the community needs that your project will address.

There are 18 million blind and 65 million partially visually impaired in India alone, including 1.6 million children currently attending blind schools. The blind children do not have access to Braille coded books, readers or printers. It is what they hear is what they learn.

This project will open up a world of opportunities to millions of visually impaired in India.

How did your project team identify these needs?

The project team works closely with visually impaired people and actively participates in exhibitions and workshops conducted by NGO's like Rotary club, vision aid and a others.

How were members of the benefiting community involved in finding solutions?

Our Subject matter experts are visually impaired students and successful professionals. The device has been evaluated by Arvind eye hospital, LV prasad eye institute, Shankar netralaya to name a few.

How were community members involved in planning the project?

The community guided us in improving and upgrading the technology to help them ease their routine activities.

HUMANITARIAN PROJECTS – PROJECT IMPLEMENTATION

Summarize each step of your project's implementation.

Do not include steps related to fundraising, applying, or reporting. (Add rows as needed.)

#	Activity	Duration
1.	Identify the number of productive population with uncorrectable visual impairment	List available
2.	Training the beneficiaries in batches	6 months
3.	Monitoring and tracking	6 months

Will you work in coordination with any related initiatives in the community? If yes, briefly describe the other initiatives and how they relate to this project. If no, please explain. Are local initiatives not addressing these needs? Or, if they are, why did you decide not to work with them?

There can be value in working with other groups including governments, nonprofit organizations, and private companies.

Government sponsor for blind students and educational institutions which will motivate the blind students complete their education.

NGO's can support in spreading awareness of this available facility for the visually impaired by conducting exhibitions, workshops inviting beneficiaries to participate.

We would like the support of corporates through their CSR funds to support education of blind students in premium institutions along with normal students with the support of Smart Vision. When people with vision difficulties study with normal students their chances of getting an opportunity to work and contribute to the society along with others increases. The visually impaired students are intellectually as able as the visually abled.

The average number of working years lost due to adult blindness is 10 years.

Young children have 30-40 years of productive life. There are 1.6 million children in blind schools. That makes 30 years of life ahead of 1,600,000 children

Please describe the training, community outreach, or educational programs this project will include.

Smart Vision Training

Purpose: Training is a critical piece of the success in the implementation of the project. Improved skills and knowledge at all levels increase competency and productivity. The focus is to improve trainer's proficiencies so that participants have a positive learning experience.

Model: Training the trainer

Location: On-site

Duration: 2-Day Train the trainer course

Audience: Rehabilitation Trainers and facilitators

Day 1

Introduction

Taking the device out of the box

Charging the device

Internet Connectivity (hotspot/WiFi)

Functionality features

Demonstration of features

Train the trainer in functionality/settings

How to contact Technical Support

How to ask for warranty repairs/RMA process

Questions & Answers
Collect feedback from the trainers

Day 2

Independent usage of features by trainers
Training Visually Impaired – by trainers
Practical exercise
Assessment of skills acquired by VI person
Wrap-up

How were these needs identified?

Low Vision Clinics and Rehabilitation Centers identify patients that come to their hospitals
Children identified for

What incentives (for example, monetary compensation, awards, certification, or publicity), will you use, if any, to encourage community members to participate in the project?

We offer the participants an experience a new way of reading and facilitate better communication.
Offer them small gifts and incentives if they use all features of the glasses regularly for a month.
We track the usage of every device through a unique device id which is registered in the user name.
We offer support to institutions and family members as the case may be by conducting workshops and entertainment programs on a quarterly basis

List any community members or community groups that will oversee the continuation of the project after grant-funded activities conclude.

These may or may not be Rotary members or clubs.
SHG Technologies, Rehabilitation centers and Low vision clinics that sponsor patients

VOCATIONAL TRAINING TEAMS – PROJECT IMPLEMENTATION

Describe the training needs that the team will address.

Not applicable

How did your team identify these needs?

Not Applicable

Describe the specific objectives of the training, including what you expect training participants to gain from the team's expertise.

Not Applicable

How were members of the local community involved in planning the training?

Not Applicable

Will you work in coordination with any related initiatives in the community? If yes, briefly describe the other initiatives and how they relate to this project. If no, please explain. Are local initiatives not addressing these needs? Or, if they are, why did you decide not to work with them?

There can be value in working with other groups including governments, nonprofit organizations, and private companies.

Not Applicable

What incentives (for example, monetary compensation, awards, certification, or promotion) will you use, if any, to encourage community members to participate in the training?

Not Applicable

How will training recipients be supported after the training to keep the skills they acquire up-to-date?

Not Applicable

List any community members or community groups that will oversee further training after the project ends.

These may or may not be Rotary members or clubs.

Not Applicable

SCHOLARSHIP (SEE BELOW FOR SCHOLAR PROFILE QUESTIONS)**

Describe the process your team used to select this candidate.

Not Applicable

How do this candidate's background, studies, and future plans qualify them for a global grant under this area of focus?

Not Applicable

BUDGET

Will you purchase budget items from local vendors? Explain the process you used to select vendors.

SHG Technologies developed this assistive device. The device has been procured for distribution by Rotary clubs in India

Did you use competitive bidding to select vendors? If no, please explain.

No. There is no other vendor developing this device. SHG Technologies is the only vendor available in India

Please provide an operating and maintenance plan for the equipment or materials you purchased for this project. This plan should include who will operate and maintain the equipment and how they will be trained.

The product carries one year warranty. Any further maintenance will be carried out by SHG Technologies

Describe how community members will maintain the equipment after grant-funded activities conclude. Will replacement parts be available?

There are no user repairable parts in the device. If there are any problems, SHG will provide assistance.

If the grant will be used to purchase any equipment, will the equipment be culturally appropriate and conform to the community's technology standards? If yes, please explain. If no, describe how the project team will help community members adopt the technology.

The device is a wearable device. All precautions are taken to ensure that it is aesthetically looking. It is tested on hundreds of patients and it is accepted by one and all.

After the project is completed, who will own the items purchased by grant funds? No items may be owned by a Rotary district, club, or member.

The device will be owned by the beneficiary.

FUNDING

Have you found a local funding source to sustain project outcomes for the long term? If yes, please describe this funding source.

No

Will any part of the project generate income for ongoing project funding? If yes, please explain.

No

Is your economic and community development activity a microcredit project? If yes, upload your [microcredit supplement](#) file.

No

****SCHOLAR APPLICANTS WILL ANSWER THE FOLLOWING QUESTIONS:**

List the two educational institutions you have most recently attended:

Provide the following information about the academic program you plan to attend:

Matriculating educational institution (including city and country):

Language of instruction:

Website:

Academic program:

Academic program start date:

Academic program end date:

List the classes you plan to take and provide any relevant links to information about the program.

How does your educational, professional, or volunteer experience align with Rotary's goals in the selected area of focus?

What are your plans immediately after the scholarship period?

How do your long-term professional goals align with Rotary's goals in the selected area of focus?