



The Permanent Forum of People of African Descent

5 to 8 December 2022

Palais des Nations, United Nations Office in Geneva

APPLICATION FOR FINANCIAL SUPPORT

Deadline for Applications: 10 OCTOBER 2022, 11:59 pm CET

OHCHR is in a position to provide financial assistance to a selected number of civil society representatives planning to participate in the first session of the Permanent Forum of People of African Descent. This assistance will take the form of a pre-paid, return airline ticket in economy class and daily subsistence allowance, which covers food, accommodation, and ground transportation expenses in Geneva, Switzerland.

Applicants will be selected on the basis of their work representing people of African descent or advocating to protect and promote the human rights of people of African descent. The selection committee will consider the potential of applicants to contribute to specific discussions on the agenda of the Permanent Forum's first session. Due regard will also be made to considerations of geographic and gender diversity.

To apply for financial support, civil society representatives are requested to send this application form, completed and signed, together with all supporting documents, in a single e-mail to: pfpad@un.org. The materials should be received no later than **10 October 2022, 11:59 pm CET**.

Incomplete applications and applications received after the deadline will not be considered.

There are **three sections** in this form.

SECTION I (To be completed by the applicant)

- 1. First name:** (as noted in the passport)
- 2. Middle name (s):** (as noted in the passport)
- 3. Family name/Surname:** (as noted in the passport)
- 4. Date of birth (dd/mm/yyyy):**
- 5. Place of birth:**
- 6. Nationality/Nationalities:**
- 7. Country of residence:**
- 8. Gender: Female/Male/Other:**

9. Contact details of the applicant:

- a. Present address:**
- b. Tel (office and mobile):**
- c. Fax:**
- d. E-mail:**

10. Are you affiliated with any organization, and, if so, what is the name of your organization?

SECTION II

11. A. Status¹:

a. Does your organization have ECOSOC consultative status?

Yes **No**

b. Was your organization accredited to the 2001 World Conference against Racism, Racial Discrimination, Xenophobia and other Related Intolerance or the Durban Review Conference in 2009?

Yes (please explain which one(s)) **No**

c. Has your organization participated in any UN human rights meetings on the issues of racism, racial discrimination, xenophobia or related intolerance (WGEPAD, CERD, Human Rights Council, UPR, Human Rights Committee, etc.)

Yes (please mention which ones and in what capacity) **No**

B. Connection to issues related to the human rights of people of African descent

a. Does your organization represent people of African descent and/or conduct work to promote and protect the human rights of people of African descent?

Yes **No**

b. In what part of the world is your work focused:

c. Please provide information on activities which your organization has carried out to represent people of African descent or to advocate for the human rights of people of African descent:

¹ Part A is for information gathering purposes only and not a selection requirement.

12. I have enclosed:

- A copy of my passport**
- A copy of my banking details (please indicate if you do NOT have a bank account)**
- Section III below of the application form duly completed, signed and stamped by the certifying organization (for individuals who represent an organization)**

13. I certify that the answers and statements made by me to the questions above are true, complete and correct to the best of my knowledge and belief.

Signature of applicant _____ **Date** _____

SECTION III (To be completed by a certifying organization)

14. Certifying organization:

- a. Name of the certifying organization:
- b. Address:
- c. Tel:
- d. Fax:
- e. E-mail:

15. Short description of the organization goals, objectives and work:

16. Present responsibilities of the applicant within the organization:

17. Reason(s) for nominating this applicant:

18. Full name and title of the certifying official:

19. Signature of the certifying official: _____ **Date:** _____

Please affix the organization's OFFICIAL STAMP