**Responsible Business Fund Plus (RBF Plus)**

**Concept Note**

**2nd Call for Concept Note**

**Window - 3 (Area 8)**

**(Open from 14th August to 4th September 2025)**

\* Required

**Service Provider Information**

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| **Do you have any Consultant/ Service Provider?** \* | |
| No  Yes (Please add SP Code) | |
| **SP Code \***  *(Upon successful registration, RBF Plus will issue the SP Code.* |  |
| **Service Provider Name** | Auto fill in after add SP Code |
| **Mobile Phone Contact** | Auto fill in after add SP Code |
| **Email** | Auto fill in after add SP Code |

**1. Information of the Proposed Business Association**

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| **Chairperson Information** *(Information should be in line with the registration)* | |
| **1.1 Name of Business Association \*** |  |
| **1.2 Name of the Chairperson \*** |  |
| **1.3 Gender \*** | Male  Female  Other |
| * 1. **Ethnicity \*** |  |
| **1.5 Mobile Phone Contact \*** | 09 |
| **1.6 Email** |  |

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| **Business Association General Information** | | |
| * 1. **Address of the Business Association \*** |  | |
| * 1. **Period of Establishing of the Business Association \*** | **Month** | **Year** |
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| **.9 Association Registration Number \*** |  | |
| Please attach the Association Registration Certificate. \* | | |

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| **Web & Social Media Links** | |
| **1.10 (a) Social Media Platform Link** |  |
| **1.10 (b) Website Link** |  |

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| **Association Size \*** | | | |
| **Number of** | **Male** | **Female** | **Total** |
| **1.11 (a) Permanent Employees** |  |  | Auto Calculate |
| **1.11 (b) Temporary Employees** |  |  | Auto Calculate |
| **1.11 (c) Members** |  |  | Auto Calculate |

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| **1.12 Agriculture Sector \*** | |
| Crop Production  Livestock and Animal Husbandry  Fisheries and Aquaculture  Forestry | Agri-processing  Agri-service  Agri-tech  Organic farming & regenerative agriculture  Other  ………………………………………………… |

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| **1.13 Geographical Coverage of the Association \*** | | |
| All States & Regions  Kachin  Kayah  Kayin  Chin  Rakhine | Shan  Mon  Nay Pyi Taw  Yangon  Mandalay | Ayeyarwaddy  Bago  Sagaing  Magway  Tanintharyi |

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| **1.14 History / Development of the Business Association \***  *(Please describe briefly achievements of the past and vision of the future)* |
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| **1.15 Current Activities of the Association \*** |
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**2. Previous experience with Trade Fairs**

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| **2.1 Have you ever facilitated member participation in a trade fair? \*** |
| Yes  No |

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| **2.2 If yes, please describe the name(s) of the trade fair(s) and the country(s). \*** |
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**3. Information about the Proposed Trade Fair**

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| **3.1 Select the area under which you would like to seek grant support from RBF Plus. \*** |
| Agrifood MSMEs Participation in Trade Fairs |

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| **Trade Fair Information** | | |
| **3.2 Name of the Trade Fair \*** |  | |
| **3.3 Background of the Trade Fair \*** | | |
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| **3.4 Trade Fair Period \*** | **Opening Date** | **Closing Date** |
|  |  |
| **3.5 Trade Fair Location \*** |  | |
| **3.6 How did you know about the proposed trade fair? \***  **(***Please describe the details. (e.g., Invitation Letter, Website, Social Media Platform, etc)* |  | |

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| **3.7 Describe the reasons why your members would like to participate in the trade fair. \***  *(Please indicate your proposed idea. How does this develop? How does your proposed idea align with RBF Plus Area of Support? Market Access, Knowledge of Market Requirements & Standards, etc)* |
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| **3.8 Please download the provided link below and complete the attached participant information form and provide the list of the MSMEs that have committed to attend the trade fair. \***  *(At least 5 MSMEs will be required to attend in accordance with the eligibility criteria. Attendance of women in the trade fair is strongly encouraged.)* |
| Please attach the Information of Participants \* |
| Please attach the Business Registrations of Applicant Members \* |
| Please attach the Documentary evidence to prove that Applicant Members are MSMEs, with either 300 employees or less or a Paid-up capital that is less than USD 720,000. \* |

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| **3.9 Describe the preparation plan of your association regarding the proposed trade fair \*** *(e.g., Knowledge Sharing of Market Requirements & Standards, Potential Market, etc.)* |
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| **3.10 Describe the type of Agrifood products your members showcase at the trade fair \*** |
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| Please attach the Product Photos that will be showcased at the Proposed Trade Fair \* |

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| **3.11 Estimated reach of interested audiences for your product \*** |  |
| **3.12 Estimated number of potential clients that could be generated by the proposed Trade Fair \*** |  |
| **3.13 Estimated increase in sales value in the market \*** |  |

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| **3.14 Confirmation of ‘No-harm’ on GESI and Conflict Sensitivity**  *(Can you confirm that the proposed activities have been assessed to ensure they will not cause harm to any specific gender, social group, or community, and that they are designed to avoid exacerbating existing tensions or conflicts?)* |
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| **3.15 Description of project’s potential for transformative results on GESI and Conflict Sensitivity**  *(How does the project aim to bring about meaningful and lasting change in promoting gender equality, social inclusion, and reducing or preventing conflict within the target communities?)* |
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| **3.16 What are the reasons for not being able to implement the above-mentioned Project Idea until now on your own without external assistance?** \* |
| Insufficient Funds to Cover Participation Costs  Lack of Required Equipment for Booth Setup or Demonstration  Limited Access to Reliable Service Providers or Suppliers  Concerns About the Quality of Products (or) Services Display  High Overall Costs (Travel, Logistics, Booth Fees, etc.)  Other (Please Specify)  …………………………………………………………….….………………………………...... |
| **3.16 (a) Describe the detailed explanation of the specific challenges, limitations, or obstacles that have prevented independent implementation of the project idea to date. \*** |
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| **3.17 If you are approaching any other Donor /Agency for Grant Assistance for the proposed idea, please present the details. \*** |
| No  Yes (Please specify the details including the name of the Donor / Agency and the support that you received)  …………………………………………………………….….………………………………...... |

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| **3.18 Present an estimate of the investment in MMK and USD needed to implement the**  **proposed Project Idea \***  *(It would help if you could provide a detailed breakdown of the proposed investment.)* | | |
| **Exchange Rate (MMK to USD) \*** |  | |
| **Description** | **Approximate Cost (MMK)** | **Approximate Cost (USD)** |
| 1.Booth Rental |  | Auto Calculate |
| 2. Travel |  | Auto Calculate |
| 3. Accommodation |  | Auto Calculate |
| 4. Marketing Materials (Brochures, Banners, etc) |  | Auto Calculate |
| 5. Logistics Cost |  | Auto Calculate |
| 6. |  | Auto Calculate |
| **Total Project Cost** | Auto Calculate | Auto Calculate |

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| **3.18 (a) Budget Requirement (Amount in MMK) \*** | | | | |
| **Total Budget**  **(MMK)** | **MSME Contribution** | | **RBF Plus Contribution** | |
| **Amount (MMK)** | **%** | **Amount (MMK)** | **%** |
| Auto Calculate | Auto Calculate |  | Auto Calculate | Auto Calculate |

(If the number of applicants for the MSME application project is high, RBF Plus reserves the right to reduce the grant percentage.)

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| **3.19 Describe your plan for financing the proposed project \*** |
| Own Money of the participation members  Contribution by association  Others (Please specify.)  ………………………………. |

**4. Contact Person for the proposed project**

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| **4.1 Contact Person Information for the Proposed Project** | |
| **Name \*** |  |
| **Title / Position \*** |  |
| **Mobile Phone Contact \*** |  |
| **Email \***  *(Please be sure to fill in correctly, as RBF Plus will send a notification email to this email address within 24 hours of your submission.)* |  |

I hereby confirm that all the information listed above is accurate and provided by me, the chairperson of the Association

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| Signature |  |
| Name of the Chairman |  |
| Date |  |
|  | |
| Please attach the Certification letter confirming the accuracy of the information contained in the application, together with the business owner’s signature | |

**Required Attachments to submit the Concept Note to RBF Plus**

Scans and photocopies are acceptable at this stage, though the originals need to be verified by the RBF Plus Secretariat later if the project moves into the stage of being approved for grant support.

Required attachments are as follows:

1. Association Registration Certificate. \*
2. Information of Participants \*
3. Business Registration of Applicant Members \*
4. Please attach the Documentary evidence to prove that Applicant Members are MSMEs, with either 300 employees or less or a Paid-up capital that is less than USD 720,000. \*
5. Product Photos that will be showcased at the Proposed Trade Fair \*
6. Certification letter confirming the accuracy of the information contained in the application, together with the business owner’s signature \*

**Submission Instructions**

* Please submit your Concept Note through the following **Online Kobo Link**:

[https://ee-eu.kobotoolbox.org/x/JK626a5j](https://eur02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fee-eu.kobotoolbox.org%2Fx%2FJK626a5j&data=05%7C02%7CMyatMyat.Phyo%40helvetas.org%7C1668420fe19a48aea0bb08ddd97567da%7C060d649d2c9344d28200a3eb9f3c4160%7C0%7C0%7C638905820466424358%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=HkIY%2FWWr4dfQxbN3xxpNd09ZGxKaNAh4LrsjykDNwU4%3D&reserved=0)

* Please note that once you make a successful submission, you will receive **a notification email** from RBF Plus within 24 hours.
* We suggest you to **first fill in the information in Word template** **of Concept Note** and later **copy and fill in the Kobo Link**.
* If you encounter any difficulties completing the form, please watch the instructional video provided below.

<https://youtu.be/5HPBsOlp-vU?si=94y4sO_XB4PVrC0S>

<https://youtu.be/QQ0D7-SNzys?si=JPRcP_p0k-pCFUcC>

Any queries regarding RBF Plus support can be addressed to mobile phone numbers:

09-456876613, 09-263702397, 09-757700697, 09-5032680, 09-774212405, 09-428061803