**KAMULI DISTRICT LOCAL GOVERNMENT**

**YOUTH LIVELIHOOD PROGRAMME (YLP)**

**YOUTH PROJECT REVIEW CHECKLIST**

**FOR DISRICT EXECUTIVE COMMITTEE (DEC)**

**A: PROJECT INDENTIFICATION**

|  |  |
| --- | --- |
| Name of Project | **OVERALL COMMENT**  **Recommended for approval:**    **Deferred**: |
| Component |  |
| Budget(UGX) |  |
| District |  |
| County/Municipality |  |
| Sub-county /TC/ Division |  |
| Parish Ward |  |
| Village/Cell |  |
| Date of Review |  |

**B: PROJECT REVIEW DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **ITEM** | **(YES/NO)** |  |
| 1. | Is there evidence of the project approval by DPTC?  -Confirm from the DPTC minutes |  |  |
| 2 | Does the Project fall within the District /Sector Priorities |  |  |
| 3 | Is the beneficiary targeting appropriate and in line with the Project Guidelines? |  |  |
| 4 | Is the approval of the project in line with the principle of equitable resource distribution with the District? |  |  |

**C: RECOMMENDATIONS**

1. Overall Recommendations: (i) Recommended for Approval (ii) deferred
2. Summary of Reasons for Deferment (if Deferred):
3. …………………………………………………………………………….
4. …………………………………………………………………………….
5. ……………………………………………………………………………
6. Corrective Actions Recommended (if Deferred):
7. ……………………………………………………………………………
8. ……………………………………………………………………………
9. ……………………………………………………………………………
10. Endorsement by Chairperson & Secretary of the DEC meeting(For & On behalf of DEC members present at the meeting):

|  |  |  |
| --- | --- | --- |
| Item | Office(1)- Chairman DEC meeting | Officer(2) – Secretary DEC meeting |
| *Name* |  |  |
| *Designation/ Position* |  |  |
| *Signature* |  |  |
| *Date* |  |  |

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