



# GRANT APPLICATION

Please complete all fields and return application by email between May 1st and July 1st to the attention of Grant Applications to [Applications@mazdafoundation.org](mailto:Applications@mazdafoundation.org)

## Contact Information

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_

Organization's Mission Statement:

Purpose for which grant is requested (*Be specific*):

What area is targeted? (Please check all that apply.)

- |                                                 |                                                       |
|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Education and literacy | <input type="checkbox"/> Cross-cultural understanding |
| <input type="checkbox"/> Social welfare         | <input type="checkbox"/> Environmental conservation   |
| <input type="checkbox"/> Scientific research    |                                                       |

What area is targeted? (Please check all that apply.)

- |                                        |                                      |                                  |
|----------------------------------------|--------------------------------------|----------------------------------|
| <input type="checkbox"/> Pre-K         | <input type="checkbox"/> High School | <input type="checkbox"/> Elderly |
| <input type="checkbox"/> Elementary    | <input type="checkbox"/> College     |                                  |
| <input type="checkbox"/> Middle School | <input type="checkbox"/> Adult       |                                  |



# GRANT APPLICATION

Does your organization target minority populations? If so, what ethnicity is served?  
(Please specify.)

**What population is served?**

Women/Girls

HIV/AIDS

Rural

Disabled

Urban

Other \_\_\_\_\_

**Anticipated Outcome of Project:**

**Plans to Measure and Communicate Project Results:**

Amount of Funding Requested: \$ \_\_\_\_\_

Fiscal year: \_\_\_\_\_

List sources and amounts of other funding obtained, pledged or requested for this purpose. (Please specify.)

	Source	Amount
1		
2		
3		
4		
5		
6		