



Please complete all fields and return application by email between May 1st and July 1st to the attention of Grant Applications to MazdaFoundation@mazdausa.com

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.)

- Education and literacy
- Social welfare
- Scientific research
- Cross-cultural understanding
- Environmental conservation

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

- Pre-K
- Elementary
- Middle School
- High School
- College
- Adult
- Elderly



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		