Thank you for your interest in the Mediterranean Women’s Fund.

To enquire about the possibility of funding please read the criteria on our website carefully and complete this form. Please make sure to submit the form via email at request@medwomensfund.org

**Date of application: DD/MM/YYY**

1. **Information about your organisation:**
2. Name of the organisation:
3. Date of creation or registration:
4. Registered address:
5. Email, telephone, website:
6. Name, age and gender of leaders (three at least):
7. Name and title of contact person(s):
8. Goals and main areas of work:
9. Names of two women’s organizations with which you have worked:
10. Describe some achievements of your organization (if this is your 1st project, please specify):
11. How did you hear about the Mediterranean Women's Fund?
12. **Your grant enquiry:** You are requesting funding for
* **Operating costs?** Explain.
* **A specific project?** If so, please specify:
	+ Project title:
	+ What activities do you plan to carry out with the funding from the Mediterranean Women’s Fund? (Describe in 3 lines)
	+ What impact do you seek to achieve through the proposed activities?
1. **Brief budget information (in Euro):**

|  |  |
| --- | --- |
| **Total budget of the organization:**1. Previous year:
2. Current year:
3. Projected next year:
 | **1. €****2. €****3. €** |
| **Total budget of the project:** |  **€** |
| **Total amount requested from the Mediterranean Women’s Fund (up to 10 000 €)** |  **€** |

-Please note that the completed form should be no longer than 2 pages. Your request will go through an initial selection process and you will receive an answer within 6 weeks. *If your project meets the MedWF criteria, you will be invited to present a more detailed second-step proposal.*