



GRANT APPLICATION FORM

Please complete the Grant Application Form below. We will also require the following supporting documents to be submitted:

1. Profile of the organisation
2. Annual report or list of activities of the organisation in the last 2 years *(if any)*
3. Balance Sheet and Account Statement of the last 2 years *(if any)*
4. Financial sustainability plan for the project

DETAILS OF APPLICANT	
Name of Applicant	Contact Details Mobile : (+)
Address	Office : (+) E-Mail :

DETAILS OF BENEFICIARY ORGANISATION	
Name of organisation	Contact Details Main : (+)
Address	: (+) Facimile : (+)
Website :	E-Mail :

Note : Please attach profile of the organisation (if available)

DETAILS OF PROJECT	
Name of Person-In-Charge of the Project	Contact Details Mobile : (+) E-Mail :
Name of Project	Project Location
For Pilot Project	For Recurrent Project
Commence Date (MMM/YYYY) :	Date Commenced :
Duration of Project :	
Amount of funding requested :	

1.	Please give a background for the project. <i>(Why is there a need for the proposed project? Identify problems that will be solved by the project. Describe the objectives of the project.)</i>
2.	Please describe the project. <i>(What does it do? What areas does it include?)</i>
3.	Please describe the target population that will directly benefit from the proposed project. <i>(What are their backgrounds? How many will likely benefit annually?)</i>
4.	What are the desired outcomes of your project? Please describe them.
5.	What are the phases and steps (milestones) involved to achieve the desired outcomes stated above?
6.	Please explain how you plan to evaluate / measure all the milestones as stated above.
7.	Are volunteers involved in the execution of the project? If yes, how many active volunteers were involved in the project / organisation in the last year?

8.	Are there similar projects in the community that are working towards similar outcomes? If yes, are you planning to collaborate with them or are you differentiating from them? How?												
9.	What is the total amount requested? Please provide the breakdown.												
10.	Has the organisation or anyone associate with the proposed project applied for funding from other source(s)? If Yes, please provide the details below:												
	<table border="0"> <thead> <tr> <th data-bbox="284 1061 456 1088">Source of funds</th> <th data-bbox="927 1061 1023 1088">Amount</th> <th data-bbox="1121 1061 1337 1088">Duration of funding</th> </tr> </thead> <tbody> <tr> <td data-bbox="252 1115 834 1142">1. _____</td> <td data-bbox="927 1128 1027 1142">_____</td> <td data-bbox="1121 1128 1318 1142">_____</td> </tr> <tr> <td data-bbox="252 1162 834 1189">2. _____</td> <td data-bbox="927 1176 1027 1189">_____</td> <td data-bbox="1121 1176 1318 1189">_____</td> </tr> <tr> <td data-bbox="252 1209 834 1236">3. _____</td> <td data-bbox="927 1223 1027 1236">_____</td> <td data-bbox="1121 1223 1318 1236">_____</td> </tr> </tbody> </table>	Source of funds	Amount	Duration of funding	1. _____	_____	_____	2. _____	_____	_____	3. _____	_____	_____
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2. _____	_____	_____											
3. _____	_____	_____											
11.	If only partial amount requested is approved for disbursement, how does your organisation plan to raise the balance of funds needed for the project?												
12.	If your application for RYTHM's grant is successful, what is your plan to sustain the project beyond the term of the grant?												

Acknowledgement and Declaration

I hereby declare that the information given in this application and the accompanying document(s) are true and correct to the best of my knowledge and that I have not withheld or distorted any facts presented.

I also declare that I, the organisation I represent and / or the proposed project is free from any litigation or investigation by the laws of any countries.

I understand that the approval or rejection of the application for grant is at the sole discretion of RYTHM and that RYTHM is under no obligation to disclose the reason(s) for unsuccessful applications.

Submitted by

(signature & organisation seal)

Date

Name :

Designation :
