

Digicel Foundation

MEK A MUCKLE - MICRO-GRANT PROGRAMME

Details of Applicant

Project Title:			
Organisation Name & Address:			
Type of Applicant:			
<input type="checkbox"/> <input type="checkbox"/> School	<input type="checkbox"/> <input type="checkbox"/> Youth Group	<input type="checkbox"/> <input type="checkbox"/> Community Group	
<input type="checkbox"/> <input type="checkbox"/> Church	<input type="checkbox"/> <input type="checkbox"/> Police Youth Club	<input type="checkbox"/> <input type="checkbox"/> Farmer Association	
<input type="checkbox"/> <input type="checkbox"/> Other			
Date of Registration/Incorporation:			
List of Executives/Leadership of the Organisation:			
Name(First name & Surname)	Position in Organisation	Time in Position	Contact Number & Email
Amount Being Requested: J\$ (Maximum J\$200,000)			

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Project Title:

Background of Community (number of persons, what is the community known for/ main occupation of the residents, percentage of youths in the area and what they are involved in) (50 words or less)

Description of Project (Give a short description/summary of your project. Include the type of project, venue and duration in months and what you hope to achieve). (100 words or less) – **Mandatory**

Belief Statement: Why should this project be selected (List no more than five key objectives of the project showing how it will address the community's needs and the impact expected) – **Mandatory**

Beneficiaries (Please state the number/type of persons who will benefit directly/indirectly within the next one to three years) – **Mandatory**

Directly (no. of persons impacted)

Who are they

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Indirectly (no. of persons impacted)	
Who are they	
Community Members Involvement and Sustainability Assessment – Mandatory	
How will the community members be involved before, during and after the project?	
Briefly state how will this project be sustained for the future (i.e. one to three yrs.)	
Budget – Mandatory	
Please outline how will the funds be used, indicating the activity and associated costs below, (insert lines as necessary)	
Expenditure Activity	Amount in J\$
Total	

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Name (Organisation Representative)

Signature & Date

Name (Organisation Representative)

Signature & Date

Justice of the Peace

Signature & Date

***NB: Please ensure that a quotation is attached to show the cost of the items or services to be procured.**