



Digicel Foundation

MEK A MUCKLE GRANT APPLICATION FORM

Details of Applicant

Project Title:

Organisation Name & Address:

Type of Applicant:

- School Youth Group Community Group
 Church Police Youth Club Farmer Association
 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\$500,000)



Digicel Foundation

MEK A MUCKLE GRANT APPLICATION FORM

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**



Digicel Foundation

MEK A MUCKLE GRANT APPLICATION FORM

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

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	



Digicel Foundation

MEK A MUCKLE GRANT APPLICATION FORM

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.**