



BOFAM FOUNDATION

FUNDING APPLICATION FORM

This form serves to collect essential data for the BOFAM FOUNDATION to consider support to your project

Applicant Information

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| 1. | Contact information (address, telephone, email, contact person) |
| 2. | General Information about your organization (legal registration details, objectives and goals) |

General Project Information

- | | |
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| 3. | General description of the project (Location, Technology, Partners) [100 words] |
| | Project Objectives: |
| | How is the community involved in the project: |
| | Does the project involve women or marginalized groups? |
| | Describe any identified project risks and how you intend to mitigate against it: |
| 4. | Expected project results and impact: |
| | How will the project be sustained? |
| 5. | Project Duration: |

Project Budget

- | | |
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| 6. | Amount requested (BOFAM) Amount being Contributed by Applicant: |
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