

# MINISTRY OF MULTI-ETHNIC AFFAIRS & SUGAR INDUSTRY

## **GRANT APPLICATION FORM**

Completed application forms and enclosures should be sent to <u>mmeasienquiries@gmail.com</u> or hand-delivered to Level 3, 318 Bali Towers, Toorak, Suva, before the deadline. For further clarifications, please contact us on 8924376 or email <u>mmeasienquiries@gmail.com</u>.

ORGANIZATION/ COMMITTEE DETAILS						
Name:						
Phone:	Email:					
No. of members in the committee:						
What category is the proposed project related to?						
⊖ Religious	🔿 Cultural	O Arts/ Music				
⊖ Language	○ Other (Please specify)					
APPLICANT INFORMATION						
Name:						
Address:	S:					
Phone: Email:						
GRANT REQUEST DETAILS						
Name of the Project:						
Total Cost:						
Requested Grant from MMESI:						
Committee Contribution:						
DOCUMENT CHECKLIST (Official	luse only)					

#### DOCUMENT CHECKLIST (Official use only)

The application will be deemed incomplete without the following documents.

Completed Application Form
Support and Validity Letter from trustees and the President of the Committee
Valid Organization/ Committee Registration
Evidence of Committee Contribution to the Project
Quotations (if any)

#### Nature of Assistance Required

Please describe the nature of the assistance you are requesting from the Ministry of Multi-Ethnic Affairs. [Attach supporting documents if available]

#### Reason(s) for the Request

Provide details on why you are seeking assistance from the Ministry of Multi-Ethnic Affairs. Describe the specific challenges or needs within your community or organization that this assistance aims to address.

### Impact of the Project to the Community

List at least three (3) positive impact the proposed assistance will benefit the community or target population.

#### **Project Sustainability**

Explain how this project will be sustainable in future and if there is any challenges associated with the project, how will it be resolved.

### **Estimated Cost**

Provide an estimate of the financial resources required to implement the proposed project or initiative. Include a breakdown of expenses where possible. [Attach supporting documents if available.

### **Project Timeline**

Indicate when you intend to start and finish	the project or initiative if assistance is granted.
Start Date:	End Date:

#### Additional Information

Please provide any additional information or relevant details that you believe would support your application [Please use more pages if needed].

#### Declaration

I understand that any false information provided may disqualify the organisation/committee from the funding programme.

#### OFFICIAL USE ONLY

Received by:			
Verified by:			
Application Status:	Approved		
	Declined	Reasons:	