



**NORTH AMERICA WALES FOUNDATION
SEFYDLIAD CYMRU GOGLESS AMERICA
2020 GRANT APPLICATION**

- 1. Project Name**
- 2. Applicant Information**

Organization Name

Address

City/State/Zip Code

Phone

Email

Project Director

Email

Role in the Organization

- 3. Organization Profile (Briefly describe your organization, its' mission, and achievements over the past five years.)**
- 4. Project Description**

5. Time period of project and probable completion date

6. How will your project benefit your organization and your community?

7. Amount requested

8. Summary of project costs (list other funding sources and any in-kind funding from your organization.)

9. Describe how your project will benefit the Welsh-North-American community?

10. Organization fiscal activity (attach financial reports if applicable.)

11. We certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge.

Signature_____ Date_____

Name (print)_____

Title (if applicable)_____

For questions please email or telephone:

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