



PEACE Isla Mujeres

Dear Neighbor,

Thank you for your interest in applying for a non-profit community grant with PEACE Isla Mujeres. We are very excited to be able to be working collaboratively to help make the community of Isla Mujeres better for one and all.

Attached is the grant application form, when filling this out please keep a few things in mind:

-The application form is very detailed, but don't be scared! Just do the best you can and please ask for help if you need any assistance in filling out the form or in clarification on any of the questions. If you do have any questions, or would like assistance with filling out the form, please call Anna Douglas or Lorena Lopez (998 189 3772) and they will be glad to assist you.

-You do not need to type the application. If you would like to that is fine, but handwritten applications will be accepted as well.

PEACE Isla Mujeres will be making grants on a rolling-granting basis. That means that if you propose a project/service and are approved for only partial funding, we will keep your request on file and may consider your request for additional funds in future granting cycles.

We have begun our first granting cycle and are currently accepting non-profit community grant requests until February 17th, 2008. When you have completed your request form, please call or email Anna Douglas (contact information below) to arrange to drop off the request.

Thank you again for your interest in working with PEACE Isla Mujeres, we look forward to seeing your proposal!

En Unidad y Comunidad,

Anna Douglas

Director, PEACE Isla Mujeres
998-224-3323
anna@peace-islamujeres.org

PEACE Isla Mujeres Grant Application Form

BUDGET

| | |
|---|----------|
| Peso amount requested: | \$ _____ |
| Minimum amount necessary to partially fund request: | \$ _____ |
| Total annual organization budget: | \$ _____ |
| Total project budget (if applicable): | \$ _____ |

PROPOSAL NARRATIVE

I. Organization Information

1.) Brief summary of organization history, including the date your organization was established:

2.) Please state your mission &/or vision if these have been established:

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PROPOSAL NARRATIVE

I. Organization Information

3.) Brief description of organization's current programs or activities, including any service statistics and strengths or accomplishments. Please highlight new or different activities, if any, for your organization:

4.) Your organization's relationship with other organizations working with similar missions. What is your organization's role relative to these organizations?

5.) Number of board members, full-time paid staff, part-time paid staff and volunteers.

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II. Purpose of Grant

| <i>Specific activities for which you seek funding &/or non-monetary support:</i> | <i>Who will carry out these activities?</i> | <i>Time frame in which these activities will take place:</i> | <i>Objectives or ways in which you will meet the goal(s):</i> |
|--|---|--|---|
| 1. | | | |
| 2. | | | |
| 3. | | | |

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|--|---|--|---|
| 4. | | | |
| 5. | | | |
| 6. | | | |

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II. Purpose of Grant

5.) How will the proposed activities benefit the community of Isla Mujeres? Be as clear as you can about the impact you expect to have.

6.) Long-term funding strategies (if applicable) for sustaining this effort:

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III. Evaluation

1.) Please describe your criteria for success. What do you want to happen as a result of your activities? You may find it helpful to describe both immediate and long-term effects.

2.) How will you measure (quantitatively &/ or qualitatively) these changes?

If approved for funding &/or non-monetary support do you agree to submitting timely monthly and final grant progress reports? (Forms will be provided) ___ Yes ___No

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ATTACHEMENTS

Please attach the following:

Required:

- 1. Organization budget for current year, including income and expenses.**
- 2. Project Budget, including income and expenses.**

If applicable:

3. Additional funders. List names of corporations and foundations from which you are requesting funds, with peso amounts, indicating which sources are committed or pending.
4. List of board members and their affiliations.
5. Brief description of key staff, including qualifications relevant to the specific request.
6. A copy of your current Mexican A.C documentation and documentation indicating a tax-exempt 501(c)(3) status.

Name of person submitting this application

Title

Phone

E-mail

Signature of person submitting this application

Date

PEACE Isla Mujeres Grant Application Form

For Office Use Only

Grant Request Number:

Peace Isla Mujeres Executive Director Recommendation:

Peace Isla Mujeres Advisory Committee Recommendation:

Further information needed:

Request Approved:

_____ No

_____ Yes

Amount Approved \$ _____

_____ full amount of request _____ partial amount of request

Funds currently available with PEACE? _____ yes _____ no

If no, describe plan to gather funds:

Non-monetary support approved (if applicable):

Date of grant dispersment: _____

Date of first monthly report due: _____

Date of annual/final report due: _____

Signature of Peace Isla Mujeres Executive Director

Date