

| Project name: | Location: |
|---|--------------------------|
| Project Manager: Manager Phone: Manager Email: | |
| Brief description of project: | |
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| Primary objectives: | |
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| Measurable outcomes: | |
| | |
| Describe how the community being assisted will be involved: | |
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| | |
| Total # of beneficiaries: | |
| Funds needed: | |
| Planned start date: | Planned completion date: |
| Project partner Organization or Institution: | |
| Submitted by: | |
| Phone: Email: | |
| Date submitted: | |