

WWEST Partners Funding Application Form

Organization name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

URL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status applying for: [ ]  Network Partner [ ]  Network Affiliate [ ]  New Initiatives Grant
 [ ]  Strategic Planning Extensions Grant [ ]  Impact Measurement Grant

Amount requested for 2015:

Primary contact (name, address, email, phone):

Affiliation:

* Post Secondary Institution (name):
* Charitable / Non-Profit Organization (name and registration number):
* Other (describe):

**Abstract Round: Due September 15, 2014**

Attach a one page abstract that summarizes your organization and project.

**Full Application: For those with accepted abstracts, due October 15. Not required for Network Partners or Network Affiliates.**

Attach a free-form, more detailed application of no more than three pages (plus appendices) and this cover sheet. The free-form application must include:

* A summary of your organization
* A summary of your project
* The need for your project
* The impact of your project

Appendix I: A one page budget specific to this project clearly outlining expenses and revenue sources. The budget must be balanced and show where additional funds will be obtained.

Appendix II: For all extensions: An in-depth proposal and timeline with milestones

Appendix III: For impact extensions: An outline of the approach to research and credentials of those participating in the process.