



## **AFRICA MATTERS**

Conservation through Art, Education and Science

### **APPLICATION FOR ASSISTANCE. INSTRUCTIONS**

The mission of Africa Matters is to promote Conservation through Art, Education and Science, focusing on Africa, and to connect people and projects in the United States with those who can benefit in Africa and vice versa.

If you are requesting items to be purchased, please be as specific as possible as to manufacturer, model, vendors, price, specifications and any other information we would need to fulfill your request.

It is assumed that the applicant will administer the project. If the organization requires approval by an officer, that person should counter-sign the application where indicated and enclose a letter indicating approval of the project as described in the application.

Feel free to adjust the spacing in the application as seems appropriate (either by retyping or, if received electronically, by editing).

Requests for Assistance are reviewed and voted on by the Board of Directors as they are received. We will respond to your request in a timely fashion. If we cannot accommodate your request and know of other sources you might approach, we will so inform you.

# APPLICATION FOR ASSISTANCE

Date of Submission \_\_\_\_\_

NAME of the Organization or Individual \_\_\_\_\_

## PART I. THE APPLICANT.

- A. Describe the work you or your organization does in the field of Conservation.
- B. Length of time you or the organization has been involved in this work.
- C. What are your major sources of support/funding?
- D. Who benefits from your work?

## PART II. THE PROJECT.

- A. Type of Assistance Requested:  
Financial\_\_\_\_ Resources\_\_\_\_ Information\_\_\_\_ Networking\_\_\_\_ Equipment\_\_\_\_
  - B. Describe the nature of the project.
  - C. Location and timeframe of the project.
  - D. How would the project meet the objectives of Africa Matters, as described on the cover page?
  - E. The amount/nature of the assistance are you requesting.
  - F. Number, identify, and qualifications of any other persons involved directly in the project.
  - G. Date by which you need:  
An answer \_\_\_\_\_
- The requested assistance \_\_\_\_\_

### PART III. VERIFICATION AND CONTACT INFORMATION.

Signature of the Applicant\_\_\_\_\_

Title\_\_\_\_\_

Date\_\_\_\_\_

If appropriate:

Signature of the responsible officer\_\_\_\_\_

Title\_\_\_\_\_

Date\_\_\_\_\_

Contact Information:

Name\_\_\_\_\_

Mailing address\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Physical address\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: Country code\_\_\_\_\_ Area code\_\_\_\_\_ Phone Number\_\_\_\_\_

Alternate phones:

Fax Number\_\_\_\_\_

E-mail address\_\_\_\_\_

Please submit to:

Ms. Wendy Blakeley, Director

Africa Matters

382 41<sup>st</sup> Street

Oakland, CA 94610 USA