

Team Sangster **INCLUSIVITY**



APPLICATION FORM

GUIDELINES FOR THE TEAM SANGSTER INCLUSIVITY GRANT

READ CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

The MBI Inclusivity Grant seeks to support programs/projects being implemented by registered local organizations that target the growth and development of community members who have a disability. Applicants must clearly outline the intended social impact of their proposed program or project on individuals with disabilities.

Guidelines:

- The **MBI Inclusivity Grant** awards will be disbursed based on our committee's evaluation of the multiplier impact of project proposals using only the information submitted on the application form or documents appended therein.
- The **MBI Inclusivity Grant** can only be accessed by community-based organizations (not-for-profit groups and social enterprises) operating a project within St. James, Hanover, Westmoreland and Trelawny that supports persons with disabilities;
- Administrative expenses should not exceed 10% of the proposed project's total budget;
- Individual applications will not be considered.
- If your organization is not registered with the Companies Office of Jamaica, we encourage you to submit proof of registration with the Council for Voluntary Social Services, the Ministry of Education and Youth, or other recognized agencies and organizations.

ENSURE ALL APPLICABLE SUPPORTING DOCUMENTATION IS SUBMITTED WITH YOUR APPLICATION. APPLICATIONS WILL BE CONSIDERED INCOMPLETE WITHOUT THESE DOCUMENTS.

- Certificate of registration with the Companies Office of Jamaica
- Proof of registration with the Council for Voluntary Social Services, the Ministry of Education and Youth, or other recognized agencies and organizations (if not registered with the Companies Office of Jamaica).



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MBJ Airports Limited with the support of its SIA partners invites interested community-based organizations operating within St. James, Hanover, Trelawny and Westmoreland to submit applications for the MBJ Inclusivity Grant.

Your funding application will be evaluated according to the information you provide on this form. Use extra sheets if necessary.

INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED BY THE EVALUATION COMMITTEE.



GENERAL INFORMATION

Name of Organization :

Full Address :

Phone # : Contact Person 1 :

E-mail Address : Contact Person 2 :



BACKGROUND (ORGANIZATIONAL)

Provide a brief history of your organization (no more than 250 words).



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BACKGROUND (ORGANIZATIONAL)

Provide the details of your organization's core activities and programs.



SOURCES OF REVENUE

AMOUNT

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Summary of Proposal



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DESCRIPTION OF THE PROJECT

Please list all information as clearly and concisely as possible so that we can understand your project goals, objectives and intended outcomes.

Project Title : Project Timeline :

Total Budget : Location of Project :

Summary of Project



GOALS AND OBJECTIVES OF THE PROJECT


Clearly and concisely list all information so that we can understand your project goals, objectives and intended outcomes.

GOAL	OBJECTIVES	ACTIVITY

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 BUDGET LINE ITEM DESCRIPTION	UNITS	TOTAL
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Please submit applications to:

MBJ Airports Limited
Sangster International Airport
C/o Commercial Department (Departures Terminal)
876-952-3124
Email: teamsangstergrant@mbjairport.com

