

## **Empowers Africa Grant Application**

Name of organization:	
Date:	
Phone:	Email:
FAX:	Website:
Overall focus of the organiz	zation:
Amount requested (USD):	
Primary use of grant funds	:
What is the overall budget	for your project (USD):
When do you expect the pro	oject to begin and end:
Empowers Africa seeks to	support programs in the areas of human empowerment, wildlife
protection and land conserve	ation in sub-Saharan Africa. Please describe how your project fits
these goals:	

Please send this application as well as your mission statement to <u>grants@empowersafrica.org</u> with subject line "GRANT APPLICATION [Your Organization Name]".

EMPOWERS AFRICA 501(c)(3) EIN: 32-0403737 (917) 328-1611 www.empowersafrica.org 2 Beekman Place, Suite 18B, NY, NY 10022