**International Women’s Association of Yerevan (IWAY)**

**Application for Funding 2023-2024
(Email to** **iwaycharities@gmail.com** **)**

**Please complete the application in English or Armenian**

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| **Name of Applicant** |
| **Full Legal Name of Organization Applying for Funds** |
| **Address of Organization to Receive Funds** |
| **E-mail address**  | **Contact Telephone**  |
| **Title of project proposal**  |
| **What is the main aim of the project?** |
| **Which segment of the community will the project serve? (E.g. the elderly/the young/unemployed/disabled/the poor?)****How many displaced families/individuals from Artsakh does the community host?** |
| **Give a rough indication of how many people you think this project will have a positive effect on.****Directly** **Indirectly** |
| **Is this a new project?****If not, for how long has it been running?** |
| **How is it funded at present?** |
| **Is the IWAY funding intended to cover the entire project or only a portion of it?****If the request is for only a portion of the project, what other sources of funding are utilized?** |
| **What is the estimated time frame for completion of the project?** |
| **How much funding is required to see the project through to completion? (Proof of estimates may be required should the IWAY grant funding.)**  |
| **Brief description of the project (including how the project will affect the community as a whole, i.e. the local and the displaced population from Artsakh)**  |
| **What are the expected changes/outcomes/benefits/results expected by the end of the project?** |
| **How will the project, in particular the spending be monitored, and by whom?** |
| **How will the project be maintained after completion?**  |
| **Any other comments** |
| Signature Date:Email the completed form to **iwaycharities@gmail.com** |