



Mount Diablo Music Education Foundation

www.mdmeff.org

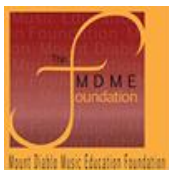
MDMEF Grant Application

Before completing this Grant Application, applicants should review the MDMEF Grant Guidelines to ensure the proposed grant meets MDMEF's criteria. Applicants are also encouraged to discuss with MDMEF the suitability and timing of a grant before completing the Application. Inquiries may be directed to Joan Miller, President of MDMEF, by email at Joan@mdmeff.org.

A completed Grant Application will consist of the completed Cover Page in the form that follows. If you need more space for your answers, you may attach additional pages.

If more information is required, we will contact you. We may request additional detail about:

- The proposed program or project.
- The needs, problems, and/or opportunities to be addressed.
- How the project contributes to improved access to quality music education for students whose access to quality music education would otherwise be limited due to historic inequities or economic disadvantages and the challenges the project faces.
- Who else in the District is addressing this issue.
- The students to be served and how they will benefit.
- How you will reach the students you intend to serve.
- How the project contributes to music education.
- The goals of the project and how you will you achieve these objectives.
- Key staff and volunteers' qualifications and experience critical to the project.
- Other organizations and/or partners participating in the project and their roles.
- A timetable for the project.
- The fundraising strategy for the project.
- How the project will be sustained financially.



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Name of Nonprofit Applicant: _____

Contact Person/Title _____

Email: _____ Phone Number: _____

Organization Website: _____

Address: _____

City/State/Zip: _____

Project Name: _____

Purpose of Grant: _____

What age group will your project serve? _____

What demographic will your project serve? _____

How will the requested grant contribute to more equitable access to music education? _____

How has the applicant's community demonstrated support for the program? _____

Beginning and ending project dates, if applicable: _____

Amount Requested: \$ _____ Total Project Cost: \$ _____

Is your organization an IRS 501(c)(3) not-for-profit? Yes No ID # _____

Applications should be sent directly to:

Mount Diablo Music Education Foundation
25A Crescent Drive, #165
Pleasant Hill, CA 94523 OR E-Mail to Joan@mdmef.org