



## Mount Diablo Music Education Foundation

[www.mdmeff.org](http://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](mailto: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 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.



Mount Diablo Music  
Education  
Foundation

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**MDMEF**

**Grant Application**

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