## The Catherine and Maxwell MEIGHEN FOUNDATION

Application				
Organization Name				
Registration #				
Website				
Head Office Address	Street Address			
	City	Province	Postal Code	
Applicant Contact	Name			
	E-mail		Phone	
Executive Director/CEC	D/President Name			
Category of Organizati	on			
Mission/Description of	Organization (content mu	st fit within the space provided)		

Previous grant history with The Catherine and Maxwell Meighen Foundation

Date and amount of last grant

Purpose of last grant

Was a report provided?

If not, please attach a report (in pdf format) with this application.

## **Grant Request Information**

Project Name

Date of Application

**Request Amount** 

Objectives (maximum 3 objectives, content must fit within the space provided)

## Method/Activities to achieve (content must fit within the space provided)

## Outcomes/Achievements (content must fit within the space provided)

Have you included the following attachments (in pdf format):

Legally Authorized to submit application

Name

Signature

Title

Date

Please send to Application@TheCatherineandMaxwellMeighenFoundation.ca