

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/CEO/President Name \_\_\_\_\_

Category of Organization \_\_\_\_\_

Mission/Description of Organization (maximum 100 words total)

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, maximum 300 words total)

**Method/Activities to achieve (maximum 500 words total)**

**Outcomes/Achievements (maximum 3 outcomes, maximum 300 words total)**

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

Legally Authorized to submit application

Name

Title

Signature

Date

Please send to [Application@TheCatherineandMaxwellMeighenFoundation.ca](mailto:Application@TheCatherineandMaxwellMeighenFoundation.ca)

Telephone calls or enquiries on progress are not accepted