

STEP 8

If your organization has previously submitted a grant request to SNF, type your Tax ID or VAT number in the “TaxID” box and press the search button as indicated in *Figure 11*.

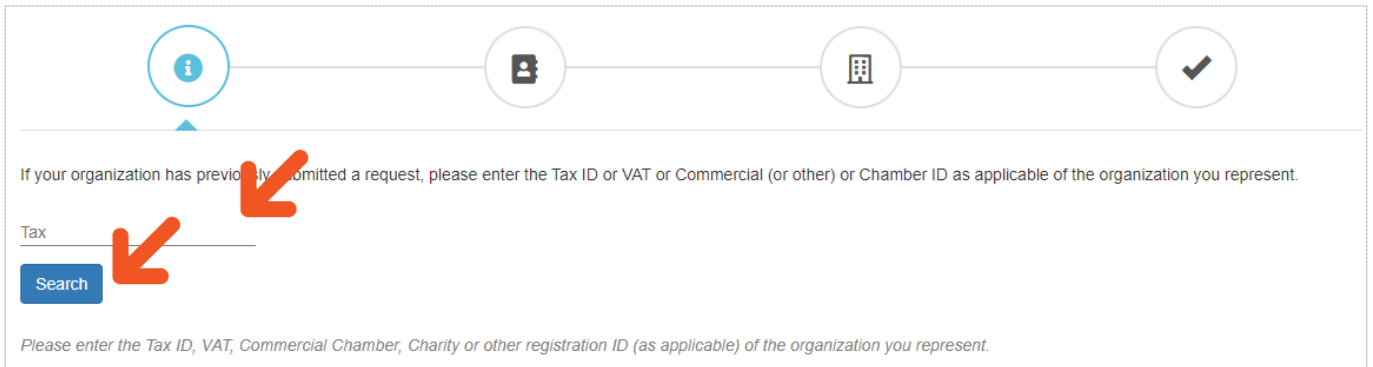


Figure 11

STEP 8.A

If your past records are found, you will be asked to review and confirm the information on file for accuracy. Once updated or confirmed, press the “Save and Continue” button as shown in *Figure 12*.

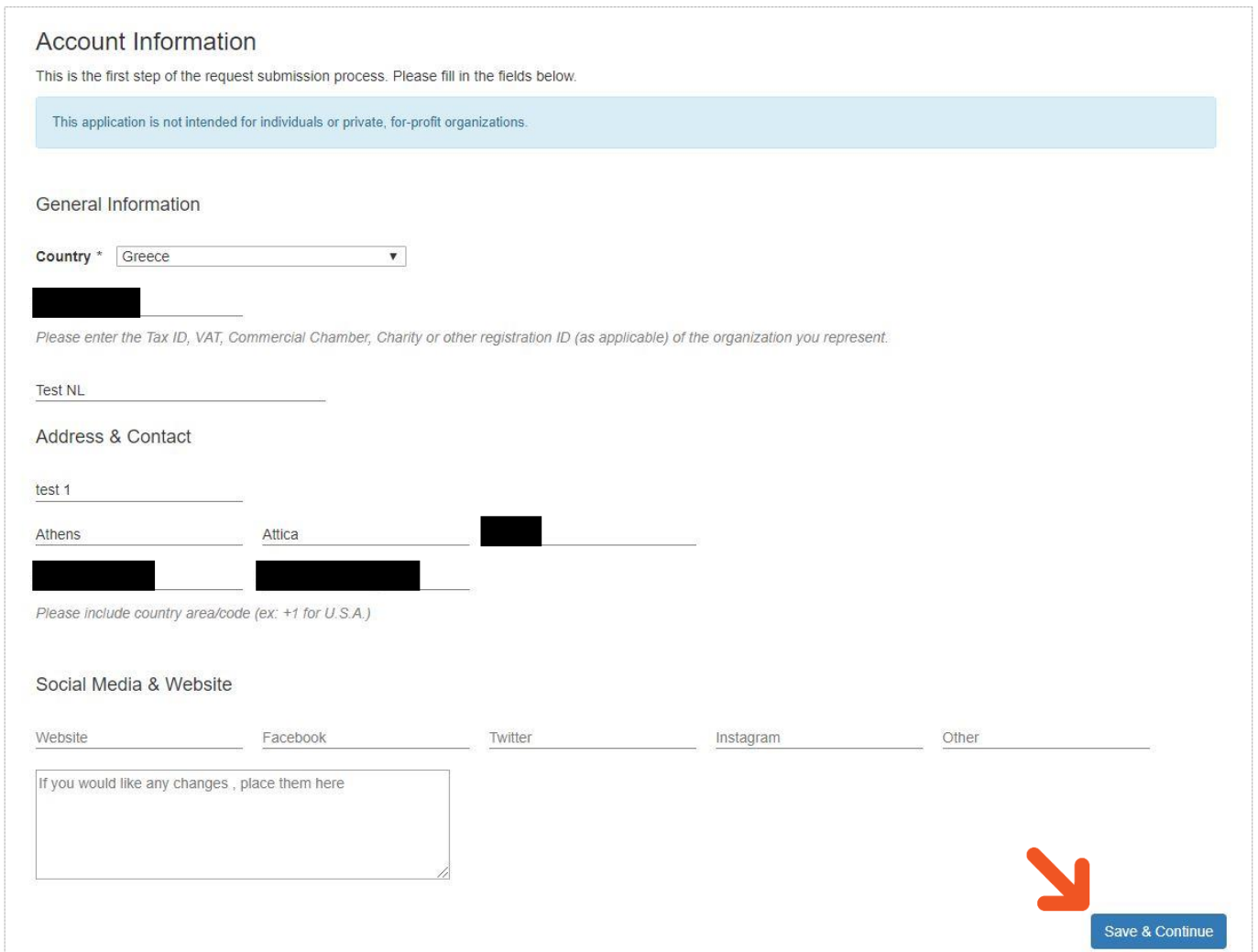


Figure 12

STEP 8.B

If this is the first grant request submitted to SNF by your organization, please provide the information requested in each field and press the “Save & Continue” button as shown in *Figure 13*.

Account Information

This is the first step of the request submission process. Please fill in the fields below.

This application is not intended for individuals or private, for-profit organizations.

General Information

Country *

Tax ID*

Please enter the Tax ID, VAT, Commercial Chamber, Charity or other registration ID (as applicable) of the organization you represent.

Organization Name*

Address & Contact

Address* Number*


City* State/Province* Postal Code*

Telephone* Email*

Please include country area/code (ex: +1 for U.S.A.)

Social Media & Website

Website Facebook Twitter Instagram Other



The * denotes a mandatory field.

Figure 13

STEP 9

In the next step (*Figure 14*), you will be asked to provide the authorized signatory of your organization and the contact person if he/she is different from the authorized signatory.

Authorized Signatory

Salutation *

First Name* Last Name*

Position*

Telephone* Mobile*

Please include country area/code (ex: +1 for U.S.A.)

Email*

If the Authorized Signatory is the same person with the contact person for the application, check the box

Contact Person

Salutation *

First Name* Last Name*

Position*

Telephone* Mobile*

Please include country area/code (ex: +1 for U.S.A.)

Email*

Figure 14

STEP 10

In the next step, fill in the background information about your organization, provide a description of the grant request and fill in the proposed grant amount. Once all fields are completed, press the “*Submit*” button (*Figure 15*). Note that once you have submitted this information, you will not be able to edit your responses, so please make all desired edits before clicking “*Submit*”.

Background Information about the Organization

Background information about the organization * - (up to 2,000 characters)

Please consider including the organization's history, primary goals and activities, number of personnel and volunteers, and the population served.

Grant Request

Grant Request * - (up to 2,000 characters)

Please consider including the purpose, beneficiaries, location, and timetable of the project for which you are requesting support.

Amount Requested* **Currency***

Please use whole numbers only (without commas and periods)

Once submitted, your responses cannot be edited, so please make any desired changes before hitting the "Submit" button.

If you would like to receive a PDF copy of your application, please tick the box.



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Figure 15