

More Jobs Better Lives Foundation Inc. Grant Program Application Form
FY 2022

1. Organizational Overview

Application Date			
Organizational Name			
Representative			
Address			TEL
Establishment Date		Initial Operational Cost	
Number of Personnel			
Contact Person		TEL	Email
Personnel Structure			
Career of Representative			

2. Mission

1) Organizational Mission
2) Details of Activities and Background of Establishment
3) Relevance of Organizational Mission to MJBL's Mission
<i>Explain how your organization's mission will contribute to MJBL's mission "Create more jobs (options) to make the world where more people can lead a better life."</i>

3. Organizational Operation

1) Operational Cost	
<i>Explain how your organization has raised money since its establishment.</i>	
2) Name of Donator(s) (Natural Person and/or Corporation, etc.)	
3) Details of Project Procedures	
4) Name of Past and Current Partner(s) and Details of Their Business	
5) Past Performances	
Amount of Money Raised	
Number of Jobs Created	
Number of People Supported	
Support Area or Region	

4. Latest Organizational Three-year Plan

1) Summary of Organizational Three-year Plan Based on Submitted Business Plan	
2) Resources Required to Implement and Achieve Above Plan	

3) Strengths and Weakness of Your Organization
<p><Strength> <i>Explain what your organization's strength is and why.</i></p> <p><Weakness> <i>Explain what your organization's weakness is and why.</i></p>

5. Project Overview

1) Project Name
2) Project Site, Area, or Region
3) Social Issues Behind This Project
4) Solution and Expected Outcome
<i>Detail how this project solves the issues mentioned above.</i>
5) Expected Resources
<i>Detail what kinds of support (ex., monetary support, material support, human networks) should be provided for this project.</i>

6) Budget and Breakdown	
Requested Grant Amount (in total)	

Breakdown	Amount
7) Evaluation Methods	
<i>Propose <u>multiple evaluation methods</u> of the outcome brought about by this project.</i>	
8) Project Term	
Start:	
End:	

I hereby certify that there is no false statement in this application form and attached documents and agree to the application guideline.

Date :

Signature :

Title :

Organization Name :