

Application Form

Request for Funding



Please only use this application form. Using other application forms is not permitted.

Please note that you are required to complete all fields, if it is not applicable, please write N/A.

BASIC DETAILS

1. Company/Organisation Details

Name of entity: _____

Type of entity: _____ Registration Number: _____

Operating town/s: _____

Length of time operating in town/s: _____

Please attach company registration certificate

2. Company/Organisation Address

Name of Contact Person: _____

Address line 1: _____

Address line 2: _____

City: _____ Province: _____

Postal code: _____ Email: _____

Phone number: _____ Period of operation in town: _____

Please attach proof of address not older than 3 months.

3. Alternate contact person

Name: _____ Cell: _____

Email: _____ Town: _____

4. Organisation/ company Banking Details

Account Holder: _____

Account No.: _____ Account Type: _____

Branch Code: _____ Branch Name: _____

Please attach proof of banking details (copy of bank letter/latest bank statement)

ORGANISATION DETAILS

5. Brief overview of your company/organisation

Please attach company/organisation profile (if applicable)

6. Directors, trustees or members details

Member 1

Full name: _____

Town: _____ Period of residency in town: _____

Race: _____ Gender: _____ Role: _____

Area of expertise: _____

Member 2

Full name: _____

Town: _____ Period of residency in town: _____

Race: _____ Gender: _____ Role: _____

Member 3

Full name: _____

Town: _____ Period of residency in town: _____

Race: _____ Gender: _____ Role: _____

Area of expertise: _____

Member 4

Full name: _____

Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Member 5

Full name: _____
Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Please attach certified ID's of members

7. Management details

Management 1

Full name: _____
Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Management 2

Full name: _____
Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Management 3

Full name: _____
Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Management 4

Full name: _____
Town: _____ Period of residency in town: _____
Race: _____ Gender: _____ Role: _____
Area of expertise: _____

Management 5

Full name: _____

Town: _____ Period of residency in town: _____

Race: _____ Gender: _____ Role: _____

Area of expertise: _____

8. Please list top three donors to the organisation within the last 12 months with the amounts received, when the funds were received and the purpose for which they were received.

9. Has there been any major changes in your organisations financial situation in the past 12 months, if yes please explain?

Yes No

10. Please list substantial (formal or informal) partnerships with government, civil society, and/or businesses. Please ensure that you state the nature of each partnership with a brief description.

FUNDING REQUEST

If you are requesting funding for more than one project, please complete pages 5-11 for each project.

11. Name of project

12. Which town/s will the project be taking place in?

13. Scope of the Project – Large, intermediate or small-scale? Please also include the timeframe of the project – e.g., once-off, long-term that will require re-application in following financial cycle for. E.g., July 2025 – April 2026

14. How will the project sustain its impact beyond the funding period?

15. Please tick the relevant project strategic focus area/s:

Health and Wellbeing	Tick
Feeding schemes/community gardens	
Training of healthcare workers	
Preventative projects i.e., health and mental health campaigns, addressing social ills (gender-based violence, drug abuse etc.)	
The care or counselling of, or the provision of education programmes relating to, abandoned, abused, neglected, orphaned or homeless children.	

The care or counselling of poor and needy persons where more than 90% (ninety per cent) of those persons to whom the care of counselling is provided are over the age of 60 (sixty).	
The care or counselling of, or the provision of education programmes relating to, physically or mentally abused and traumatised persons.	
The rehabilitation, care or counselling of persons addicted to a dependence-forming substance or the provision of preventative and education programmes regarding addition to dependence-forming substances.	
The promotion of protection of family stability.	
Development, construction and enhancement of living environments for vulnerable groups	
The promotion of, and education and training programmes relating to, environmental awareness, greening, clean up or sustainable development projects.	
The provision of health care services to poor and needy persons.	
The care or counselling of terminally ill persons or persons with a severe physical or mental disability, and the counselling of their families in this regard.	
The prevention of HIV infection, the provision of preventative and education programmes relating to HIV/AIDS.	
The care, counselling or treatment of persons afflicted with HIV/AIDS, including the care or counselling of their families and dependants in this regard.	
The provision of primary health care education, sex education or family planning.	
The administration, development, co-ordination or promotion of sport or recreation in which the participants take part on a non-professional basis as a pastime	
If other, please explain	
Sustainable and Inclusive Economic Development	
The development of sustainable business enterprises for the benefit of the communities within the Associated Community.	
Funding for SMME incubation	
Mentorship programmes for SMMEs	
Enhancing agricultural, manufacturing and service value chains	
Community development for poor and needy persons and anti-poverty initiatives, including: <ul style="list-style-type: none"> • the promotion of community-based projects relating to self-help, empowerment, capacity building, skills development or anti-poverty; • the provision of training, support or assistance to community-based projects; • the provision of training, support or assistance to emerging micro enterprises to improve capacity to start and manage businesses; • the provision of legal services for poor and needy persons; or • the provision of facilities for the protection and care of children under school-going age of poor and needy parents. 	
Financial literacy, workforce skills and technological adoption for underserved communities	

Other	
Education and Development	
The provision of early childhood development services for pre-school children. Support of ECD centres, Training for ECD practitioners, Provision of Teaching and Learning Material	
Training for unemployed persons with the purpose of enabling them to obtain employment.	
The training or education of persons with a severe physical or mental disability.	
The provision of bridging courses to enable educationally disadvantaged persons to enter a higher education institution	
The provision of school infrastructure or equipment for public schools and educational institutions engaged in public benefit activities	
Provision of Technology Support, Training or Upskilling	
Extra-curricular activities	
Career guidance and counselling services provided to persons for purposes of attending any school or higher education institution	
Programmes addressing needs in education provision, learning, teaching, training curriculum support, governance, whole school development, safety and security at schools, pre-schools or educational institutions	
Educational enrichment, academic support, supplementary tuition or outreach programmes for the poor and needy.	

16. Write a brief description of the proposed project. What is the objective of the project and the key activities that will achieve those objectives?

17. How does your project align with the vision and mission of the Trust?

18. In no more than 3 sentences, what is the problem your project is trying to solve/address?

19. What is your organisations experience in implementing the proposed project? (Please focus on documenting your track record with facts and figures).

Please attach proof of past successes (if applicable)

20. Please provide an implementation plan

21. How will the project be implemented? How will the project use local suppliers and service providers?

SUPPORTING DOCUMENTS

All applicants are attach the below documentation to your proposal and send to fowzia@mulilo.com

	DESCRIPTION	YES	NO
1	<p>Signed Constitution of the organisation (I.e. Cor15.1, Trust Deed etc.) (If you have received funding from the Trust before this is not applicable)</p> <p>Explain if necessary: _____</p>		
2	<p>ITA34 certificate from SARS (we do not accept certificates of good standing in place of ITA34 certificates)</p> <p>Explain if necessary: _____</p>		
3	<p>Certified BBBEE Certificate</p> <p>Explain if necessary: _____</p>		
4	<p>Company/organisation registration certificate</p> <p>Explain if necessary: _____</p>		
5	<p>Company/organisation profile (if applicable)</p> <p>Explain if necessary: _____</p>		
6	<p>Certified copy of ID documents of the members</p> <p>Explain if necessary: _____</p>		
7	<p>Proof of banking details</p> <ul style="list-style-type: none"> • Copy of recent bank statement not more than 3 months old; or • Letter form the bank with bank stamp <p>Explain if necessary: _____</p>		
8	<p>Proof of address not older than 3 months</p> <p>Explain if necessary: _____</p>		
9	<p>Latest signed audited financial statements</p> <p>Explain if necessary: _____</p>		
11	<p>Up to date management accounts for the current financial year</p> <p>Explain if necessary: _____</p>		
12	<p>Letter of authority authorising applicant to apply on behalf of the company/organisation</p> <p>Explain if necessary: _____</p>		
13	<p>Organisational budget for the current financial year</p> <p>Explain if necessary: _____</p>		

14	Detailed budget for the project (Please provide invoices of local outsourced suppliers/service providers if applicable) Explain if necessary: _____		
15	Maximum of 3 photographs that could be used to better explain or motivate your proposal (if applicable) Explain if necessary: _____		
16	Copy of a letter from SARS confirming PBO status (if applicable) (E.g., section 18A or section 3) Explain if necessary: _____		