



HARRY & MARTHA COHEN FOUNDATION

GRANT APPLICATION FORM

Name of Registered Charity:

Canada Revenue Number:

Year founded or incorporated:

Name & title of senior staff person:

Contact person if different from above:

Mailing address:

Telephone:

Fax:

Website:

E-mail address:

Organization's mission, vision or
Statement of purpose:

Population served:

E.g. Seniors, Youth, Newcomers,
First Nations, public

Project Title:

Brief Project budget:

One time or ongoing initiative?

Date of Request:

Amount of Request:

Public Recognition, how will our donation
be recognized?

Harry & Martha
Cohen
Foundation



Please mail your organization's most recent audited financial statements to our office along with this form.

Project Description: