

BENEFICIARY NOMINATION FORM

NGO / Charity Home / Community:											
Contact Details											
Official Registered Name:											
Year of Establishment:											
NGO Registered No.:											
Physical Address:											
Postal Address:											
E-mail:				Telephone:				Mobile:			
Website:				Fax:							
Contact Persons											
<i>Organization Head</i>		Full Name:									
E-mail:		Telephone:				Mobile:					
<i>Primary Contact Person</i>		Full Name:									
E-mail:		Telephone:				Mobile:					
Beneficiary Information											
What is the focus area of the organization:											
Physical Footprint:		National <input type="checkbox"/>		Regional <input type="checkbox"/>		Which Region:					
Information on your benefactors:											
Total no. of benefactors				Gender breakdown: Male <input type="checkbox"/> Female <input type="checkbox"/>				Age range:			
Specific area where assistance is needed		Please state precisely: Estimated cost: <i>Note: Supply photos if physical improvement is required</i>									
How would assistance help your organisation											
Note:											
a) Rainbow Bridge will send a representative to visit the premise and discuss with the organization head / senior representative											
b) Rainbow Bridge may request a copy of the latest audited financial account											
From which other sources do you receive funding, e.g. government, fund raising, international donors, etc.											

For office use

Approved: Yes No

Status:

Reference No.: _____

Authorised by: _____
(Name) *(Signature)*

