

2026 Global Micro-Grants Application (English)

PROGRAM DEADLINE: April 16, 2026 at 11:59 PM(Midnight)

Organization Details

Organization Overview

Country *

Name of Organization *

Date Organization Began *

☐ Clear

Nonprofit Registration/Certificate

Please upload proof of registration. *

Select File

No file selected

Maximum File Size: 5MB , Accepted file types: .pdf

No file attached

Organization Information

Name of Director *

Title *

Email Address *

Fund Administrator Name (if different than Director)

Title

Email Address

Name of On-Site Director (if different from the Director)

Title

Email Address

During the past 5 years have you received funds from other organizations? *

- ☐ Yes
☐ No

If yes, please list your sources.

Organization Contact Information

Organization Address (Street, Village/City, State/Province/Region, Postal Code, County) *

Street Address

Village / City

State / Province / Region

ZIP / Postal Code

Country

Email Address *

Website

Facebook

Instagram

YouTube

LinkedIn

X

Other

Additional Questions

Describe the leadership role(s) women play in your organization. (10 sentences or less) *

Max Number of Words: 300

Describe the impact of your organization in the community. (10 sentences or less) *

Max Number of Words: 300

Project Details

Project Details

This section pertains to the project for which you are requesting funds. Do NOT describe your organization in this section.

Give a detailed description of the project for which you are requesting funds, and information about how the funds will be used. BE SPECIFIC. Tell us what you are going to do and how you are going to do it. List the steps to implement the project from start to finish. *

US Dollar amount requested (maximum US \$3000) *

\$

Maximum \$3000 US dollars

(Max range: 3000)

What is the community need addressed by the project? *

Max Number of Words: 300

What is the anticipated length of the project? (Must be 12 months in duration or less) *

Describe the role of women in managing the project. *

Max Number of Words: 300

Describe the direct participants in the project including the number of participants; and any secondary beneficiaries (e.g., children, families) and the expected number of secondary beneficiaries. *

Max Number of Words: 300

Please write out the project budget in US Dollars. If equipment is involved, explain how it will continue to be used after the project is completed. The budget should include the following information, totaled up:

ITEM	QUANTITY	ITEM COST	TOTAL COST

*

Select File

Choose File

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How will the impact of the project continue once it has been implemented? *

Max Number of Words: 300

Describe your evaluation plan to assess the impact of the project. How will you determine whether the project has been successful? How you will assess the impact of the project? How you will measure the results? *

Max Number of Words: 300

References

Reference #1

You must provide the names and email addresses of two people EXTERNAL to your organization who can serve as references and speak to your core competencies and the contributions of your organization to your community. They should be able to answer the questions below: How do you know this organization? How well does this organization complete the projects they start? How well do they use the funds they receive? Does this organization successfully complete the projects they start and on time? These persons must not be a Board member or staff member.

Contact's First Name *

Contact's Last Name *

Contact's Email *

Contact's Address (Street Address, City, State/Province/Region, ZIP/Postal Code, Country) *

Contact's Relationship to Organization *

Reference #2

You must provide the names and email addresses of two people EXTERNAL to your organization who can serve as references and speak to your core competencies and the contributions of your organization to your community. They should be able to answer the questions below: How do you know this organization? How well does this organization complete the projects they start? How well do they use the funds they receive? Does this organization successfully complete the projects they start and on time? These persons must not be a Board member or staff member.

Contact's First Name *

Contact's Last Name *

Contact's Email *

Contact's Address (Street Address, City, State/Province/Region, ZIP/Postal Code, Country) *

Contact's Relationship to Organization *

Attestation

Attestation

I certify that the information that I provided in this application is true to the best of my knowledge. *

☐ Yes

☐ No

I agree to provide a progress report at 3 months from the start of the project (or the midway point), and when the project is completed. *

☐ Yes

☐ No

I agree to publicly acknowledge AWIU's funding of the project. *

☐ Yes

☐ No

I agree that the money will not be used for anything other than the project set out above. *

☐ Yes

☐ No

I agree to participate in AWIU activities such as Conversations, Newsletters, Chapter meetings, social media, etc. *

☐ Yes

☐ No

By choosing Yes for these questions you are authorizing the submission of this application and agreeing to provide information to AWIU upon award of a grant (if selected).

How did you find out about the AWIU Global Micro-Grants program? *



Please be aware that due to the number of applications submitted, not all applications can be funded. All applicants will be notified of AWIU's decision, and application status can be tracked in this system.

Submitter Information

Submitter Name *

Submitter Title *

Submitter Email Address *