Text

Description automatically generated

**SUPPORTING REFERENCE FORM**

This form is part of the application process and must be completed.

|  |  |
| --- | --- |
| The applicant’s ability to receive funding | |
|  | |
| How you see the grant contributing to the strategic needs of the association? | |
|  | |
| Name |  |
| Job Title |  |
| Signature |  |
| Date |  |