



Thank you for your interest in the MAREAS grant opportunities. We are pleased to learn more about your organisation and the work you are leading to advance reproductive autonomy. As part of the application process, we invite you to answer the questions provided in this application form.

Hereby, you can also download and review the application question set and budget template before starting your application beginning. We recommend drafting your responses offline and gathering any supporting information in advance.

Please ensure that all budget amounts are presented in euros (EUR) and that you answer all mandatory questions. You can complete the application form in English, Spanish, or French. To switch languages, click on the language selector in the top right corner of the website and choose your preferred language.

We look forward to learning more about your work!

MAREAS Team

I. Information about the organization

- Name of the organization:
- Date of creation:
- Address of the organization (if applicable):
- Country of the organization:
- Is the organization registered: Yes/No
- If registered, please indicate the date of registration:
- If registered, please indicate the full name of your organization's legal representative:
- If your organization is not registered, please note if you already have a fiscal sponsor in your country. Fiscal sponsor is a legally registered organisation that receives and manages funds on your behalf.
- If your organization is registered, please attach the registration document.
- Is your organization: local, national, regional, international
- Is your organization part of a bigger network, if yes please indicate the name of the network
- Explain the leadership and membership structure of your organization
- Website/social media accounts of the organization:
- Phone contact of the organization or the primary contact person: (if applicable)





- E-mail of the organization:
- Name, role and contact of the primary contact person:
- Mission and vision of the organization:
- What are the major successes of your organization from last year or lately?

II. Information about the project/program

- Title of the project/program:
- Duration of the project:
- Budget amount requested:
- Please choose which grant window you want to apply for:
- Description of the project/program: Context and objectives (500 words maximum)
- Description of primary beneficiaries and audience:
- Description of why you think the project is significant for reproductive justice, access to sexual and reproductive health, and bodily autonomy
- Pick 2 out of the following to describe the nature/ objective of your proposal (multiple selection possible)
 - Abortion advocacy
 - Organizational capacity strengthening
 - Research, evidence-generation and communication
 - Access to information
 - Access to abortion care and services, including self-managed abortion
 - Movement-building and networking
 - Monitoring anti-rights movements and responding to backlash
 - Training of healthcare providers and community workers

III. Implementation

- How does this project/ proposal fit in your broader mission and vision
- Does the activity/program involve any partnerships, if yes please indicate with whom you will be working and make sure to note the roles for each partner
- Describe how you plan to implement the project/program: Describe key activities and methods that you envision mobilizing.
- Do you foresee any risks, challenges or obstacles associated with the project/program, and how do you plan to overcome them?
- Description of how you plan to evaluate the results of the project/program





- Do you foresee any need for support/follow-up from the MAREAS consortium in relation to the implementation of your project/program? If yes, please explain.
- Will you need additional technical or administrative support to set this up? If so, please describe the capacity enhancing or support you will need from MAREAS? (advocacy training, financial assistance, etc).

IV. Financial situation and budget

- Please indicate the last year's annual budget of your organization:
- Please indicate your budget for the current year:
- Please indicate if you applied for any other grants for this project/program, and received any confirmation/reply
- Budget template: Please fill in the budget template and attach here.

