

Reef Rescue and Rapid Response Fund

| | Grant Application | | |
|--|--|--|--|
| SEAOF | ** complete and return to grants@seaofchange.com** | | |
| CHANGE | Date of Application: Anticipated Date of Project Completion: | | |
| Primary Contact & Organization/Company – | | | |
| Name: | | | |
| Website & Email: | | | |
| Phone or Skype: | porator: | | |
| Associated Dive Operator: Conservation Affiliation: | | | |
| | | | |
| Reef Damaging Incident – | | | |
| Date: | | | |
| Location (attach m Description: | ap): | | |
| Description. | | | |
| | | | |
| _ | | | |
| Funding Request - Amount (\$500 to \$ | | | |
| Project Description | | | |
| - , | | | |
| | | | |

| Proposed Budget – Item | Description | Funding Requested Cost (\$USD) | Matching Funds* (\$USD) |
|---------------------------|-------------|-----------------------------------|-------------------------|
| Logistics/Divers | | | |
| Equipment/Supplies | | | |
| Field Gear | | | |
| Boat Gas | | | |
| Materials | | | |
| Other | | | |
| TOTAL | | | |

^{*}Includes volunteer effort/time

| DELIVERABLES: Rapid response should be completed within three to six months of secured funding |
|---|
| Do you anticipate project completion within this timeframe? Yes No |
| Upon completion, a two-page report including at least 5 before/after photos of the reef and a 1-2 |
| minute video about the project are required. |
| Will you provide the deliverables as detailed above? Yes No |