

Project Outline

This project outline gives us a first short impression of your project or idea. Please check in advance whether your project or idea is in line with our funding criteria. You can find our funding criteria on our website: https://morpho-foundation.com/index en.html#weitergehts

Date:			
1. Proj	ect Title		
	Short, informative project title (max. 40 ch	naracters)	
	Area of support: □ Medicine & Health □ Art & Culture		
2. App	olicant Details		
	full name of the organisation		legal form
	full street address		
	zip code and city		country
	managing director and chairman		
	legally authorized representative		
	website		



	Contact Person			
	name and surname	•		
				ters, then
	department			
	phone number/fax number	!		
	e-mail	l.		
	If the address of the contact person is diff please provide the address of the headqu		ganization's headquart	ers, ther:
	full street address			
	zip code and city		country	
	Has there been any previous funding form ☐ yes ☐ no	n the Morpho Four	ndation?	
3. Pro	ject Description			
	Please describe using keywords max. 1000 What are the objectives/purpose of the p			



Planned project	period (from - to)
What target gro	oups do you want to reach with the project?
What solution a	pproach does the project have?
Are there alread	ly existing similar projects in terms of content?
ts	
What are the to	tal costs of the project?
What financial s	support is to be provided by the Morpho Foundation?
Do funding part	ners for the project already exist?
□ yes	Tiers for the project directly exist.
□ no	
If yes, which one	es and in what amount?

Privacy Policy:

The applicant agrees to the privacy policy of the Morpho Foundation gGmbH dated 17.11.2021 (https://morpho-foundation.com/privacy_policy.html).