



50 under 50

your idea + small grant = big difference
@ CMHC

Application

Date: _____

Applicant Name: _____

First _____ *Last* _____

Role at CMHC: _____

Worksite: _____

Phone: () _____ Email: _____

What is the best way to reach you? _____ Amount Requested (under \$50): _____

Purpose (In 1-3 sentences, describe how you plan to use the funds):

Making a Big Difference (In 1-3 sentences, describe how your small grant will make a big difference in the quality of care in outpatient services. *This question is very important! We welcome your creativity!*):

Submission

Please submit all applications by email to Director Kyle Pedersen at the CMHC Foundation, kyle.pedersen@yale.edu. If you are not able to submit your application by email, please contact Kyle to make alternate arrangements (203-974-7089 or kyle.pedersen@yale.edu).

Follow-Up

Upon completion of your project, we will contact you to request a very brief report describing how you used the funds and the difference that your project has made at CMHC.