

IAMF Letter of Intent

For Office Use Only
Application Number:

Contact Information: Required

Applicant: _____

Address _____

Phone Number: _____

Fax Number: _____

Email Address _____

Web site Address _____

Project Leader: _____

Project Outline – *Please provide a brief outline of the proposed project and how it fits with the IAMF program goals. Demonstrate partnerships with other organizations, if applicable, identify anticipated outcomes that will be achieved by the project, the contributions of the project to the industry, and list project deliverables or products. (Use no more than the space provided, 11 point font or larger)*

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