**#RAREis Form**

Please complete the #RAREis Form below accurately and thoroughly. Once finished, save the completed form and upload it to Amgen’s donation portal. You will then be prompted to answer a series of additional questions and upload the required supporting documentation.

* Organization Information:
* Organization Name:
* Organization Website:
* Contact Name:
* Contact Email:
* Location:

**Eligibility & Background**

* Which rare disease(s) does your organization support?
* What is your organization’s annual revenue?
* How did you hear about the #RAREis Global Advocate Grant?
* Has your organization applied for this grant in the past?
* If yes, was your organization previously awarded a grant?

**Program Proposal**

* Please describe the ways in which your organization serves and supports the rare disease community.
* If awarded, how will your organization use this grant to make an impact? Please include specific details on how the $5,000 will be allocated.