



LAFAYETTE KIWANIS FOUNDATION, INC. GRANT APPLICATION

The mission of the Lafayette Kiwanis Foundation, Inc. is to use our assets to fulfill grant requests from 501(c)(3) agencies in the Tippecanoe County area who fit within our stated purpose.

To assist us, explain your request for funding. Please be brief. Some requests tell life stories - two pages are all we need.

PLEASE TELL US ABOUT YOUR ORGANIZATION

1. Name of organization (group). You must be a 501(c)(3) organization. Please attach a copy of your organization's IRS Determination Letter.

2. Purpose of your organization.

3. Number of clients you serve

4. Explain your accomplishments

PLEASE TELL US ABOUT THIS GRANT REQUEST:

4. Grant amount you are requesting. \$ _____

5. Date of request (today's date). _____

6. Date funds are needed. _____
7. Explain how your organization will use the requested amount.

8. How many individuals will be served by the funds requested?

0-10 _____ 11-25 _____ 26-50 _____ 51+ _____

9. Have you requested funds elsewhere for this project? Yes _____ No _____

If yes, please explain.

10. To whom should our check be made payable?

11. How did you learn about our foundation?

12. How will your organization acknowledge the Lafayette Kiwanis Foundation if we approve your grant request?

13. Your organization's contact person. _____

Phone number. _____

Email _____

After completing this form, please submit it to:

Lafayette Kiwanis Foundation
Mr. Jeff Love
200 Quincy St.
West Lafayette, IN 47906