



Club and district grant application

Club/district information:

Kiwaniis club or district requesting funding: _____

Kiwaniis district (for club grant requests only): _____

Address: _____

City: _____ State/Province: _____

Postal code: _____ Country: _____

Contact information for Kiwanis-family member responsible for providing subsequent documentation and grant reports to the foundation:

Name: _____

Telephone with area code: _____

Email: _____

Certification

The undersigned certifies the information contained in this application to be true and correct.

Authorized signatory for grant request

Date

Project information:

Project name: _____

Grant request amount: US\$ _____

Number of children who will benefit from this grant: _____

Proposed project start date: _____

Proposed project end date: _____

Describe attempts to secure revenue from other sources:

Describe your club/district's involvement in this project, including monetary contributions and contributions of time or labor by club members:

How will the grant funds be spent?

Can the money be obtained elsewhere?

Would a grant less than the amount requested still make the program viable?

Would this program require further funding?

Who are the members of the staff that will carry out the program?

What are their backgrounds and qualifications?

Impact:

What are the goals of the program?

Does the program serve young children? If so, how?

What would the long-term outcomes of the grant be?

What are the program's objectives? Are they measurable? If so, how?

What specific activities must be carried out to meet the objectives? Are they on schedule?

If this grant is approved, how will the Kiwanis International Foundation be promoted?

How will the grant further the goals and ideals of Kiwanis and promote the growth and development of Kiwanis in the area?

Provide an overview of the project, program or organization your club/district supports. Explain the nature of the problem that merits this project and how the project corrects or lessens the problem. Explain why your club/district supports this program and why the Kiwanis International Foundation should fund it.

Budget:

Provide a summary budget with an explanation of each line item, including how the cost was determined. Applications missing budgetary information will not be considered for funding. The following guidelines will help categorize program expenses.

Salaries and fees: Include all staff salaries that are allocated to the program. Identify each position, salary and percentage of time to be devoted to the program.

Fringe benefits: Include related benefits and taxes allocable to the salaries listed. Identify fringe benefits as a percentage of salaries.

Consultants: Include all fees, honoraria and expenses paid for consulting and professional services of individuals or organizations that are not paid staff of the organization. In the budget narrative, identify consultants and anticipated costs individually.

Printing/publications: Include expenses for production of all printed materials. Identify specific publications, number of copies planned and anticipated size of each publication.

Media costs: Include expenses for radio, television, newspapers, billboards, newsletters, etc.

Telephone: Include all telecommunication expenses. Identify how anticipated usage is determined.

Supplies: Include office supplies, subscriptions, books and other material under US\$250.

Postage: Include postage expenses not incorporated in the above categories. Identify how the estimates are calculated.

REVENUE:

Kiwanis International Foundation grant request US\$ _____

Income contributed by your club/district US\$ _____

Other foundations US\$ _____

Public agencies

US\$ _____

Corporations

US\$ _____

Individuals

US\$ _____

In-kind contributions

US\$ _____

Total revenue*

US\$ _____

EXPENSES:

Salaries and fees

US\$ _____

Telephone

US\$ _____

Fringe benefits

US\$ _____

Supplies (please list)

US\$ _____

Consultants

US\$ _____

Postage

US\$ _____

Printing/publications

US\$ _____

Media costs

US\$ _____

Other (please explain)

US\$ _____

Total expenses*

US\$ _____

*Total revenue must equal total expenses.

Submission instructions:

Provide seven (7) single-sided copies of this application by postal mail to the address below. Please do not submit applications in binders. Only complete applications, with all required information submitted by the deadline, will be considered. Do not send information *beyond* what is requested on the application. Any such extraneous information will disqualify your application from consideration.

Mail applications to:

Program Services Manager
Kiwanis International Foundation
3636 Woodview Trace
Indianapolis, IN 46268
USA