



GRANT APPLICATION

Applications must be postmarked by August 30th.

- A. **Information About Your Organization** (You may be contacted if Kiwanis has questions about your application)

Organization Name: _____

Street Address: _____

City, State, Zip: _____

Contact Person: _____

Contact Person's Phone: _____

Contact Person's Email: _____

- B. **Amount Requested (up to \$1,500):** _____

C. Application Requirements

- a. Attach a one page DESCRIPTION OF PROJECT for which you desire funding assistance, include specific details about:
 - i. **How the project will impact children and families in our area; and**
 - ii. **How Kiwanis Club members could volunteer for this project.**
- b. Copy of current organization's budget and project budget.
- c. List of your Board of Directors.
- d. Proof of non-profit status, such as 501© (3) letter of determination.

D. If You Have Questions and Where To Submit Application:

Please reach out to stevenspointkiwanis@gmail.com with any questions.

Submit your application by August 30th to: Kiwanis Club of Stevens Point, P.O. Box 751, Stevens Point, WI 54481. All applications must be postmarked by August 30th.

Applicants will be notified of approval/denial by September 15, of year submitted.

“The Kiwanis Club of Stevens Point is a service organization serving youth and families with compassionate generosity in the greater Stevens Point community.”