## KIWANIS CLUB OF ISSAQUAH - GRANT APPLICATION

## **MISSION**

The mission of the Kiwanis Club of Issaquah is to determine those needs of the community which, when satisfied, will enrich the community and enhance the quality of life for its residents, with special emphasis on supporting and enhancing youth, from ages birth to age 21 years. It will employ its leadership, labor, and financial resources to support programs, projects and services to that end. It will also support those Club projects and programs critical to the success of our mission; to include membership development, leadership training, and fundraising.

## **FUNDING CRITERIA**

Through community	-based fund	draising activi	ties. Kiwanis	provides a	grants that:

Have a potentially high impact;

Organization Name:

Meet needs outside the responsibilities of traditional and institutional sources;

Address emerging needs in the Issaquah community; and/or

Form partnerships that help build a better community.

Kiwanis's fiscal year begins October 1. Applications with the best chance to be considered for funding in the annual Kiwanis budget must be submitted no later than August 15. Applications submitted after August 15 are considered as funds become available. For approved grants, Kiwanis reserves the right to request verification of the applicant's use of the funds.

## APPLICATION

Contact Person:

Please provide the following information (on an attached sheet if necessary):

	Address: Tax ID #: Date of Application Submission:	Ema Phot					
Chaalr							
Check	one: Existing Project I	Emerging Needs	General Operating				
1.	. Describe the project or program in detail. Include the cost of the specific project or item as well as the total budget for the project.						
2.	Describe the characteristics of the people who will benefit from this project.						
3.	How many people in the Issaquah community will benefit from this project?						
4.	What other sources of funding are you seeking?						
5.	Describe how the project meets the mission and funding criteria noted above.						
6.	Please include a copy of your organization's most recent IRS form 990 (only Part IX, Statement of Functional Expenses).						
Please	submit completed applications to: President(c	)issaquahkiwanis.org <u>or</u>	Kiwanis Club of Issaquah PO Box 1111				
			Issaquah, WA 98027				
For In	ternal Use Only:						
	this Application to	Committee					
	st Reviewed on nt Approved:						
	to Requesting Organization on						