

The Kiwanis Club of Oakville
Grant Application

Please note this application must be received and postmarked no later than MARCH 15th of THE KIWANIS OF OAKVILLE fiscal year.

Name of Organization: _____

Charitable: number: _____

Contact person: _____

Contact information: _____

1. Describe the work your organization does in our community (mission). Tell us how your funding request will directly impact children and youth in the community.

_____.

2. What is the amount requested? _____.

3. Tell us why your organization needs this funding. Why are your other sources of funding not sufficient?

_____.

4. Explain what your organization will do with the money (describe the activities that will occur). When will these occur?

_____.

5. Why is this needed in our community?

_____.

6. What is the main population targeted by these activities? How many activities/services are expected to be provided for this amount of funding?

7. Do you track these activities (keep statistics on activities/services provided)?

8. Are you prepared to provide Kiwanis Club of Oakville with feed-back on how the money was spent?

9. Who will be responsible for ensuring the money is spent as requested (as in question 3)?

10. How will Kiwanis Club of Oakville be promoted within your organization and the community should we accept to provide funding?

11. Is there any other information that you might deem important to share that would support your request?

Name of applicant (bloc letters): _____

Date of application: _____

Signature of applicant: _____