



SAN DIEGO LIONS WELFARE FOUNDATION
EDUCATIONAL ORGANIZATION GRANT APPLICATION

Grant requests must be submitted via email with all documents bundled together as ONE ATTACHMENT to SDLIONSCLUB@GMAIL.COM.

DATE OF REQUEST _____ **DATE FUNDS ARE NEEDED:** _____

SCHOOL NAME: _____

HOW MUCH MONEY ARE YOU REQUESTING FROM THE S.D. LIONS CLUB?

\$ _____

IF APPROVED, TO WHOM SHOULD THE CHECK BE MADE AND WHERE SHOULD IT BE MAILED?

SCHOOL DISTRICT _____

PUBLIC or PRIVATE _____

CONTACT PERSON _____

PHONE NUMBER _____ **FAX NUMBER** _____

EMAIL ADDRESS _____

MAILING ADDRESS

LION SPONSOR FOR REQUEST (If Applicable) _____

WHAT IS THE GEOGRAPHICAL AREA BEING SERVED BY THIS REQUEST?

HOW MANY STUDENTS WILL BE SERVED BY THIS REQUEST? _____

WHAT PERCENTAGE OF THE STUDENTS WHO WILL BE SERVED ARE AT-RISK STUDENTS?

WHICH OF THE FOLLOWING CATEGORIES DOES THIS REQUEST FALL UNDER?

- € A- CAPITAL IMPROVEMENTS
- € B- OPERATING *(Administrative Costs, i.e. Administrator Salaries & Fixed Overhead, etc.)*
- € C- EQUIPMENT *(The organization is encouraged to provide the San Diego Lions with a list of multiple equipment options, if appropriate.)*
- € D- PROGRAM *(Program operating budget, i.e. including salaries directly related to the Program.*
- € E- OTHER _____

PLEASE PROVIDE A LINE ITEM BUDGET FOR THIS REQUEST. € Attached with application.

PLEASE DESCRIBE HOW THIS MONEY WILL BE USED *(An overview of the Program or how equipment will be utilized.)*

DOES THE SCHOOL HAVE A FOUNDATION? _____

IF YES, WHAT IS THEIR CONTRIBUTION TO THIS REQUEST?

WHAT CATEGORICAL FUNDING DOES THE SCHOOL RECEIVE?

IF THE REQUEST IS A RECURRING EVENT, HOW WILL THE SCHOOL FUND IT NEXT YEAR?

HOW WILL THE SCHOOL EVALATE THE PROGRAM?

IS THERE A BRANDING OPPORTUNITY FOR THE LIONS CLUB OF SAN DIEGO?

WHAT OTHER ORGANIZATIONS HAVE YOU APPROACHED FOR FUNDING FOR THIS PURPOSE?

PAST FUNDING HISTORY FROM THE S.D.LIONS WELFARE FOUNDATION (*Year & Amount, Past Five Years*)

I certify that these funds will be utilized for the purpose stated and will not be deposited into a GENERAL OPERATING fund. If my/our request is funded, I will provide a full accounting of how or where the funds were expended within two months of my/our check receipt from the S.D. Downtown Lions Club.

DATE: _____

Organizational Representative

IN ADDITION TO THE REQUESTOR, THE SCHOOL ADMINISTRATOR/PRINCIPAL NEEDS TO SIGN APPROVAL FOR THIS REQUEST:

DATE: _____

School Administrator/Principal

Requestor Instructions: *The San Diego Lions Welfare Foundation funding process involves three separate group reviews and can take from five weeks up to three months. To expedite the process please ensure that the full application packet is received via mail as one attachment prior to the first day of each month. There are no meetings in December. Holiday requests should be received no later than September 1.*

San Diego Lions Club Welfare Foundation, 310 Market Street, San Diego, CA 92101

501(C)(3) TAX ID# 33-0299972

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EMAIL: sdlionsclub@gmail.com

WEBSITE: www.sandiegolions.org

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