

Grant Application

For All Organizations Applying for Grants from KIF

1. Provide all documents and information requested.
2. Submit clear, readable copies of all documents.
3. Please send to KIF the completed and signed form together with the documents requested (by mail or by email).

I. Organization Information			
Full Legal name in native language:			
Name in English:			
Acronyms or Other Names Used:			
Country of Incorporation:			
Legal Address:			
Phone Number:		Fax Number:	
Email Address:		Website:	
Contact Person			
Name:		Title:	
Phone Number:		Email Address:	

II. Legal Status	
1.	Has the Organization been legally incorporated or formed in your country? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of incorporation _____ Date Organization began activities _____
2.	Is the Organization recognized by the government in your country as a non-profit entity? <input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Is the Organization recognized by the government as a tax exempt organization? <input type="checkbox"/> Yes <input type="checkbox"/> No

III. Official Documents & Governance	
(new applicant only; returning grantee only if changes made to these documents)	
1.	Founding/Governing Documents: Please provide a copy of each of the Organization's founding documents, including: <ol style="list-style-type: none"> a. Registration certificate, charter, articles of incorporation, bylaws and/or any other founding or governing documents either issued or recognized by the government in your country b. Any official document(s) that establish the Organization's non-profit and/or tax exempt status c. Any amendments to the founding/governing documents that affect the Organization's status or operation, including name change, change of purpose, change in registration or tax status, etc.
2.	Translation: Provide full translation into English of any official documents that are not written in English.

IV. Regulations	
1.	Does/did any part of the Organization's net earnings ever inure to the benefit of any private shareholder or individual? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:
2.	Does/did the Organization ever engage in any business activities that are not related to its charitable non-profit activity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:

V. Activities & Goals	
1.	Does your Organization have a mission statement describing its current focus of activities? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: please provide a copy.
2.	List 3 of the Organization's main activities (attach additional sheet if necessary): 1) _____ 2) _____ 3) _____
3.	Attach a 1 or 2 page summary that lists the specific charitable goals the Organization wants to accomplish, together with the standards by which progress toward the goals can be measured. Please also include a description of the Organization's strategies for achieving such goals; focusing on the specific approaches you've identified and why your Organization believes these methods will benefit your target audience or advance your issue. Please also include a description of the Organization's capabilities for achieving such goals: identify the supporting resources, capacities, and connections that are directly related to helping you achieve goals.

VI. Financial Information	
1.	Please send a grant budget for the period that you are requesting funds that describes how the grant funds will be utilized.

VII. Current Officers	
List the names and titles of the officers or other authorized persons who currently hold positions of legal responsibility within your Organization (e.g., president, secretary general, chairman, etc.)	
	Name Title
1.	_____
2.	_____
3.	_____
4.	_____
5.	_____

NOTE: If number of officers is greater than 5, please add as many additional lines as necessary.

VIII. Current Board of Directors

List the names of the members of the Board of Directors if your Organization.

Name

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

NOTE: If number of officers is greater than 5, please add as many additional lines as necessary.

As an authorized representative of the Organization and one of the currently serving officers listed above, I declare that I have examined the foregoing statements and attached documentation, and to the best of my knowledge they are true, correct and complete:

NAME: _____ DATE: _____

TITLE: _____

SIGNATURE: _____