

KAPPA DELTA CHI FOUNDATION
PROGRAM/PROJECT GRANT APPLICATION

Organization Information:

Name and address: _____

Phone number: _____ Email: _____ Date: _____

Chapter President: _____ Phone number: _____ e-mail: _____

Program coordinator/title: _____ Phone number: _____ e-mail: _____

Organization's total operating budget for current year _____

Has the governing board approved a policy, which states that the organization does not discriminate as to age, race, religion, sex or national origin? yes ___ no ___ When? _____

Does the organization have federal tax-exempt status? ___ yes ___ no If no, please explain

Total Proposed Project/Program Budget: _____ Amount Requested: _____

Program/Project Name: _____

Duration of Project/Program: from: _____ to: _____ Frequency? weekly, monthly, each semester, annually, one time

Nature of Request: ___ project ___ program ___ other When are funds needed? _____

I the undersigned, an authorized officer of the organization, do hereby certify that the information set forth in this grant application is true and correct, that the Federal tax exemption determination letter attached hereto has not been revoked and the present operation of the organization and its current sources of support are not inconsistent with the organization's continuing tax exempt classification as set forth in such determination letter.

I also assure that any funds awarded to our organization will only be used for the expressed purpose. I will provide the necessary documentation to support actual Program/Project expenses.

I understand that if funds awarded are, or appear to be misused, the Foundation has the right to full recovery of those funds.

Print Name & Position

Signature

Date

NARRATIVE

(No more than two pages; include applicant's name on the top of each page)

Project/Program Abstract

Describe in three to five sentences the proposed program, how it relates to the Foundation's mission, capacity to carry out the program, and who will benefit from the program.

Organization Information

Provide a brief summary of the organization's:

- mission, goals, programs, and major accomplishments
- show evidence of community service projects
- description of the chapter location geographic & demographic (population)
- total number members/volunteers

Project/Program Description

Provide a brief summary of the Project/Program:

- Explain the significance/scope of the program and why your organization is qualified to carry it out.
- Describe the expected outcomes and the indicators of those outcomes.
- Outline the strategy and timeline to be used in the development and implementation of the program.
- Explain the university's and/or other organizations' involvement.
- Describe plans for obtaining other funding needed to carry out the project/program or organizational goals, including amounts received from fundraising.
- If the project/program is expected to continue beyond the grant period, describe plans for ensuring continued funding after the grant period.

REQUIRED DOCUMENTATION

1. Completed and signed application
2. Narrative
3. Expected Budget
4. Actual Budget w/copies of receipts **must** be turned in at the end of Program/Project within 15 days. Failure to do so gives the Foundation the right to full recovery of funds.

ORGANIZATION NAME: _____

EXPECTED BUDGET

EXPECTED PROJECT/PROGRAM REVENUE

	Total Revenue	Committed	Pending
1. In-Kind Support (list specific sources on following page)	\$ _____	\$ _____	\$ _____
2. Contributions (Gifts from Individuals)	\$ _____	\$ _____	\$ _____
3. Chapter fundraising	\$ _____	\$ _____	\$ _____
4. Grants (list sources on following page: university, other organizations)	\$ _____	\$ _____	\$ _____
5. Program Service Fees and Other Earned Revenue (registration fees, etc.)	\$ _____	\$ _____	\$ _____
TOTAL PROJECT/PROGRAM REVENUE	\$ _____	\$ _____	\$ _____

EXPECTED PROJECT/PROGRAM REVENUE SUPPLEMENT

(Please indicate revenue sources as committed or pending)

Use additional sheet if necessary

In-Kind Support (list)

Other (list)

ORGANIZATION NAME: _____

EXPECTED PROGRAM/PROJECT EXPENSES

1. Professional Fees (itemize on following page)	\$	_____
2. Supplies, Printing, Duplicating	\$	_____
3. Travel	\$	_____
4. Telephone	\$	_____
5. Occupancy	\$	_____
6. Other Expenses (itemize on following page)	\$	_____
TOTAL PROJECT/PROGRAM EXPENSES	\$	_____

(Please note: revenue and expenses should add up to total project revenue and expenses.)

EXPECTED PROJECT/PROGRAM EXPENSES SUPPLEMENT

Use additional sheet if necessary

Other Expenses (list)

Professional Fees (list)

ORGANIZATION NAME: _____

ACTUAL BUDGET

ACTUAL PROJECT/PROGRAM REVENUE

	Total Revenue	Committed	Pending
2. In-Kind Support (list specific sources on following page)	\$ _____	\$ _____	\$ _____
3. Contributions (Gifts from Individuals)	\$ _____	\$ _____	\$ _____
4. Chapter fundraising	\$ _____	\$ _____	\$ _____
5. Grants (list sources on following page: university, other organizations)	\$ _____	\$ _____	\$ _____
6. Program Service Fees and Other Earned Revenue (registration fees, etc.)	\$ _____	\$ _____	\$ _____
TOTAL PROJECT/PROGRAM REVENUE	\$ _____	\$ _____	\$ _____

ACTUAL PROJECT/PROGRAM REVENUE SUPPLEMENT

(Please indicate revenue sources as committed or pending)

Use additional sheet if necessary

In-Kind Support (list)

Other (list)

ORGANIZATION NAME: _____

ACTUAL PROGRAM/PROJECT EXPENSES

7. Professional Fees (itemize on following page)	\$	
8. Supplies, Printing, Duplicating	\$	
9. Travel	\$	
10. Telephone	\$	
11. Occupancy	\$	
12. Other Expenses (itemize on following page)	\$	
TOTAL PROJECT/PROGRAM EXPENSES	\$	

(Please note: revenue and expenses should add up to total project revenue and expenses.)

ACTUAL PROJECT/PROGRAM EXPENSES SUPPLEMENT

Use additional sheet if necessary

Other Expenses (list)

Professional Fees (list)

Glossary of Terms

Community – The people living in the same district, city, state, etc.

Contribution – A tax-deductible gift, cash, property, equipment or services from an individual to a non-profit organization. Most often given annually.

Grants – Generally an allocation from foundations, corporations, or government for special projects or general operating. May be multi-year or annual.

In-Kind Support – A contribution of equipment/ materials, time, and or services that the donor has placed a monetary value on for tax purposes.

Methodology – A sequence of activities needed to accomplish the program objectives.

Outcomes – The changes in, (or benefits achieved by) clients due to their participation in program activities. This may include changes to participants' knowledge, skills, values, behavior, or condition of status.

Performance Standard – The number and percent of clients who are expected to achieve the result. Also called target, they should be set based on professional judgment, past data, research, or professional standards.

Program – An organized set of services designed to achieve specific outcomes for a specified population that will continue beyond the grant period.

Project – A planned undertaking or organized set of services designed to achieve specific outcomes that begins and ends within the grant period. (a successful project may become an ongoing program)

Success Story – An example that illustrates your program's effect on a client.

Submit Application to:

Kappa Delta Chi National Foundation

6701 Lakeside Drive

Lake Worth, TX 76135

Or Email Application to:

grants@kdxfoundation.org