



**GRANT APPLICATION  
Service Leadership Programs (SLP)  
2023-2024 Administrative Year**

**Due August 15, 2024**

Circle appropriate SLP: K Kids. Builders Club. Key Club. Circle K. AKTION Club.

Name of contact person: \_\_\_\_\_

Address of contact: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Name of project: \_\_\_\_\_

Purpose of project (700 words or less):

What improvements have been made to this year's leadership and development training opportunities? (250 words or less):

Will a virtual leadership and development training component be offered to members statewide? (250 words or less):

What new membership activities is your SLP engaging in? (250 words or less):

What new training or leadership opportunities is your SLP's leadership excited to present this year? (250 words or less):



Total number of members \_\_\_\_\_ Total Board Members & Kiwanis Committee \_\_\_\_\_

Total number of new members \_\_\_\_\_

Budget Requested \$ \_\_\_\_\_ Total Budget \$ \_\_\_\_\_

Housing/hotel \$ \_\_\_\_\_ Food \$ \_\_\_\_\_ Travel \$ \_\_\_\_\_

Cost each participant will pay (if any) \$ \_\_\_\_\_

**Please note the following:**

1. The following documents must be attached: financial statement (**must be within the last 45 days**), last year's approved budget, and current year's proposed budget. This application will not be accepted with outdated financials.
2. If this application is identical to the year prior, it will not be reviewed nor considered.

Mail To: Florida Kiwanis Foundation, 1001 Mayport Road PO Box #331433 Atlantic Beach FL, 32233

Email To: [info@Floridakiwanisfoundation.org](mailto:info@Floridakiwanisfoundation.org)