**MATCHING GRANT APPLICATION**

**Date:**

**Project name/title**:

**Amount of funding requested from LCIF in US$:**

**SECTION 1 Project Description, Goals and Objectives**

**1. Problem identification and justifications for the project. Explain the following:**  
**a. the particular problems to be addressed.**

……………

**b. Detailed reasons and justifications for the project.**

The main problems to be addressed are …………

**c. the goals and objectives to be achieved.**

The main objective is to ……..

**d. Geographical area and communities that will be served, including socio-economic data.**

…………  
Landkarte mit markiertem Projektgebiet einfügen

**e. Number of people who will directly benefit from this project on an annual basis.**

Approximately ….. people ………

**2. Project strategy and plan of action. Provide the following information:**

……………….

**a. A detailed plan for this project, indicating how the objectives will be reached.**

……………

**b. If the goal is to expand services to reach more people in need, indicate how many people have benefited to date.**

……….

**c. background information and an explanation of the supporting role of any other organizations participating in this project; include a letter of intent from the organization(s) confirming their involvement.**

…………..

**d. Project timetable for implementation and completion including key milestones.**

…………….

The project did not start yet. Without financial support of LCIF the project cannot be implemented. Due to that reason a matching grant proposal is sent to LCIF.

……………

**e.** **if the plan is to build a permanent structure, give a physical description of the facility, its contents,** **including dimensions, architectural drawings, photographs and construction cost estimates; include documentation to verify land ownership.**

………….

**f. if plans are to purchase capital equipment and similar items, please provide description of usage; include product brochures, pro-forma invoices, and supplier price quotations for all items to be purchased.**

…………….

**3. explain how the project will be sustained in future years. describe who will be responsible for operational, maintenance and administrative expenses. Provide a detailed five-year financial plan outlining operating income and expenses.**

………….

**4. describe how Lions will be involved in the proposed project.**  
**a. explain the Lions’ roles and responsibilities. include relevant history relating to Lions’ involvement.**

…………

**b. outline plans for Lions’ continued participation after LCIF support has concluded.**

…………

**c. Indicate how this project will be identified and promoted as a Lions-supported project.**

……… A plaque will be placed clearly visible at the……. with the logos of the Lions  
International Foundation (LCIF) and a list of all other promoters and sponsors.  
………….

**d. Describe the plans for recognizing the support and involvement of LCIF. any publicity materials and media regarding this project should acknowledge the support and involvement of LCIF and local Lions.**

………..

**SECTION 2 Project Budget**

**5. Include an itemized budget for the entire project using the format below:**a. income must equal expenses.  
b. indicate which currency is being used and the exchange rate to us dollars.  
c. in the income section, list all funding sources separately and specify the amount each is contributing.  
d. clarify the status of each income source as pledged, collected or anticipated. for pledged and  
anticipated amounts, indicate the date by which the funds will be readily available for the project.  
e. in the expense section, list and itemize all expense items.

currency type: ……..

exchange rate to us dollars: 1 ……. = ……… USD

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Income** | | **EURO** | **USD** | **Expense** | **EURO** | **USD** |
| SOURCES: | |  |  | ITEMS: |  |  |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |
| LCIF-Grant | |  |  |  |  |  |
| **\* Total** |  |  |  | **\* Total** |  |  |

Status

**SECTION 3 Key Contacts**

6. Provide contact information for all Lions and non-Lions who should be copied on future correspondence regarding this application.  
this should include current Lions leadership, the project coordinator, as well as the current LCIF multiple district/district coordinator.  
Please provide a name, title, mailing address, telephone number and email address for all persons.

1. Lions Club ……..  
 Contact Person: ………..

Address…….

Tel ………..

Email ………..

2. Lions Club ………

Contact Person: ………..

Address…….

Tel ………..

Email ………..

**SECTION 4 Application Endorsement**

1. Cabinet or council certification must be included with every grant application. Please submit a copy of the cabinet (single or sub-district) or council (multiple district) meeting minutes at which the application was certified.

Annex

2. for single and sub-districts, only the **district governor must sign** the application (please refer to items 2 and 3 of regulations).

3. for multiple districts, only the **council chairperson must sign** the application (please refer to items 2 and 3 of regulations).

**DISTRICT GOVERNOR’S ENDORSEMENT (SINGLE AND SUB-DISTRICT LEVEL GRANT APPLICATIONS)**this to certify that I have reviewed the LCIF Matching Grant criteria and Grant application. to the best of my knowledge the information submitted is accurate and the need exists as indicated.

I endorse this proposal and will do everything within my power as administrator of any funds granted to assure their proper and efficient use, proper accounting and regular reporting to Lions Clubs International Foundation.

district Governor name district number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
telephone fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
signature date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COUNCIL CHAIRPERSON ENDORSEMENT (MULTIPLE DISTRICT LEVEL GRANT APPLICATIONS)**this is to certify that I have reviewed the LCIF Matching Grant criteria and Grant application. to the best of my knowledge the information submitted is accurate and the need exists as indicated.

I endorse this proposal and will do everything within my power as administrator of any funds granted to assure their proper and efficient use, proper accounting and regular reporting to Lions Clubs International Foundation.

council chairperson name Multiple district number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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