



2012 Request for Consideration

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www.kitsapfoundation.org

Applicant

Organization _____

Mailing Address _____

City _____

State _____

Zip _____

E-Mail _____

Website _____

Physical Address _____

City _____

State _____

Zip _____

Contact Person _____

Title _____

Telephone _____

Summary of Grant Request

Purpose (limit 50 words):

Amount Requested: \$ _____

Type of Request (check all that apply)

Operating

Capital

New Project

On-Going Project

Have you received KCF funds previously? yes no

If yes, when & how much? _____

Organization Description

Mission Statement:

Number of full-time equivalent employees: _____

Number of volunteer hours in past year: _____

Geographic region served:

Population served:

Number: _____

Ages: _____

Gender: _____

Special Needs or Conditions:

Project Description

Population to be served:

Number: _____

Ages: _____

Gender: _____

Special Needs or Conditions:

What need will the project address? (limit 50 words):