

**The Kansas District 37 Optimist International  
Club Grant program enables the District to assist Clubs  
implementing NEW projects in their community.**

This program approved by the Kansas District to provide a \$500 matching grant for **NEW projects for** Kansas Optimist Clubs

**Guidelines for the Club Grant Program**

- Any Kansas Adult or College Optimist Club is eligible to apply for a \$500 matching grant for a NEW project for the Club.
- The project must start and finish during the current Optimist calendar year
- Grants to Clubs will be matching grants, with Clubs expected to show plans for matching the money and reporting the results. Clubs will be required to file a follow-up report
- Grants are for the current Optimist calendar year only.
- Club dues must be current

**Review Committee**

- A Review Committee will responsible for awarding the grant and will support projects that assist children and foster diversity and directly involve Optimist Member participation.

**2017 Important Dates**

**APPLICATION DEADLINE OCTOBER 1, ANNUALLY**

- October 30 – Deadline for Grant Reviews to be submitted
- August - Attendance at District Convention – Club officer, Lt. Governor to Be recognized as recipient and to share grant program awarded

*\*note grant application dates and review times may be subject to change.*

**KANSAS DISTRICT 37 – OPTIMIST INTERNATIONAL –  
CLUB GRANT PROGRAM**

This program is patterned after the Optimist Foundation Club Grant Program to provide “seed” funding for a Club to be able to initiate a NEW project that might not be possible without some matching funds to initiate.

Section 1: Name of NEW project \_\_\_\_\_  
Club Name \_\_\_\_\_ Club No. \_\_\_\_\_  
Contact Person (must be a club member) \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
EE-Mail \_\_\_\_\_ Fax \_\_\_\_\_  
Club Foundation Representative (CFR) Name \_\_\_\_\_

**.....DUES MUST BE PAID BY DATE OF APPLICATION.....**

Section 2: New Project Implementation Timeline: \_\_\_\_\_

Please put project date/timeline in complete MM/DD/YY format

\*Note must be completed during the 16-17 Optimist Year.

NEW Project Description and why it is a charitable project (*i.e. not for the benefit of a pre-determined individual, family, not a scholarship award without competitive guidelines, not professional services.*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How does this project assist children and foster diversity?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section 3. FUNDRAISING\*funds raised by club must at least match the amount of the Kansas Dist. Club Grant

How much money will your club raise to support this project? \_\_\_\_\_

**Revenue Budget Income from:**

OI Grant \$500 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Revenue \_\_\_\_\_

How will your club spend the funds

raised?

**Expense Budget- Expenses for:**

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Section 4. Demographic Information:

Approximately how many children or people in the community will be served

By this project? \_\_\_\_\_

How many Optimist Member are currently in your club \_\_\_\_\_

How many Optimist members will directly participate in the implementation of

This project? \_\_\_\_\_

How will the Optimist Members directly participate in this project (other than

Fundraising? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Section V. Club Approval (*Club president or secretary treasurer initial and signature*)

This is a new project for our club \_\_\_\_\_ (initial)

If awarded, we will match the grant given by OI \_\_\_\_\_ (initial)

Requires signature of Club President or Secretary-Treasurer:

Our club has approved this project and plans to support it.

*We agree to have a representative (Club Member, DFR, or Lt. Governor at the 2017 Kansas District Convention to accept recognition & to share outcome or anticipated outcome of grant with attendees if we are selected for a grant. If approved for the matching grant, we agree all fundraising efforts must be conducted for charitable purpose. We agree to meet all deadlines, including final reporting deadlines.*

Name \_\_\_\_\_

Title of Officer \_\_\_\_\_ Date \_\_\_\_\_

**DEADLINE –October 30, Annually - KS. DIST.OPTIMISTS - % Ruth Nelson – 15572 2. Blackfoot St. – Olathe, Ks.**

**60662**