



## WISCONSIN-UPPER MICHIGAN KIWANIS DISTRICT FOUNDATION, INC.

# MATCHING SCHOLARSHIP GUIDELINES & CRITERIA

Clubs submitting requests **MUST** be eligible for consideration.

To be eligible, a General Member Kiwanis Club must have made contributions to the Foundation's "Annual Kiwanis Club Giving Campaign" as follows:

1. **Established Kiwanis Clubs.** Kiwanis Clubs which have been in existence for at least 5 years must have contributed monies in at least two of the **past three** administrative years in an amount equal to \$5.00 per member or more (your membership number is the starting number the club has as of October 1st);
2. **Newer Kiwanis Clubs.** Kiwanis Clubs which have been in existence for less than 5 years must have made least one annual contribution to the Foundation in an amount equal to \$5.00 per member or more (your membership number is the starting number the club has as of October 1st).

### **LOCAL MATCHING SCHOLARSHIPS CRITERIA:**

Please complete the Local Matching Scholarship Application Form. KDF will only match UP TO \$500.00 at its discretion for Key Club or Circle K Club members. KDF will match up to \$250 for non-Key Club high school students or non-Circle K college students. Indicate clearly the name of the school which the recipient currently attends school. **Applications for a Local Scholarship Match must be postmarked by March 1<sup>st</sup>.**

If your club has received a Local Scholarship Match three (3) years in succession, it must wait one (1) full year before applying again for a Matching Scholarship

### **Local Matching Scholarship Recipients must submit the following before funding is released:**

1. Verification, in writing, that the Sponsored Youth Scholarship Recipient is in good standing
2. A completed "Scholarship Recipient Information form" which will be sent with the award notification
3. **A copy of the check from your Kiwanis Club to the Scholarship Recipient** and/or the college, university or technical college that the Scholarship Recipient will be attending

### **LOCAL MATCHING SCHOLARSHIP APPLICATION SUBMISSION:**

**Deadline:** Application must be received by **March 1<sup>st</sup>** for consideration.

Please complete the application form and submit to:

Mark Finger, KDF Executive Secretary/Treasurer  
571 Center St.  
Berlin, WI 54923

E-mail: [mfinger@wiumkiwanis.org](mailto:mfinger@wiumkiwanis.org)  
Fax: 866-484-4745

Please contact Mark Finger at [mfinger@wiumkiwanis.org](mailto:mfinger@wiumkiwanis.org) or 920-361-9954 if you have any questions in regards to completing the application.



# WISCONSIN-UPPER MICHIGAN KIWANIS DISTRICT FOUNDATION, INC.

## LOCAL MATCHING SCHOLARSHIP APPLICATION

**Please note:** Applications must be **postmarked by March 1st** to be considered. Local Scholarship Match Grants are reviewed at the April meeting only.

If your club has received a Local Scholarship Match Grant three (3) years in succession, it must wait one (1) full year before applying again for a Scholarship Match Grant.

Kiwanis Club(s) or requesting entity: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Please **check one (1) box ONLY** to indicate the type of grant you are requesting. KDF will **ONLY** award one (1) match per club to be paid to one (1) recipient only, no exceptions.

- |   |  |
|---|--|
| <input type="radio"/> Sponsored Key Club Scholarship        | Amount requested \$_____ (up to \$500) |
| <input type="radio"/> Sponsored Circle Club Scholarship     | Amount requested \$_____ (up to \$500) |
| <input type="radio"/> Non-sponsored High School Scholarship | Amount requested \$_____ (up to \$250) |
| <input type="radio"/> Non-sponsored College Scholarship     | Amount requested \$_____ (up to \$250) |

### Please complete the following:

1. Name of school(s) or sponsored youth club(s) where the recipient is being chosen from:

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2. Does the Kiwanis Club sponsor a Key Club or Circle K Club?

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3. Total number of scholarships awarded each year by the applying Kiwanis Club:

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4. Total amount of scholarships awarded each year by the applying Kiwanis Club:

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

5. How many hours of community service are required to receive this scholarship?

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6. Kiwanis Club's annual scholarship budget: \$ \_\_\_\_\_

7. Additional information or comments:

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**CLUB BOARD CERTIFICATION**

At its meeting held on [date] \_\_\_\_\_, the Board of Directors approved the submission of this Grant Application to the Wisconsin-Upper Michigan Kiwanis District Foundation, Inc. (KDF) for its consideration. As a Kiwanis Club, we agree to be bound by KDF's Bylaws and Policies. Further, we agree to use any and all funds received from KDF according to the terms set forth by KDF, or promptly return such funds, or any unused portion, to KDF. We also agree to complete a written progress report or final report regarding the use of such funds and provide appropriate photographs, if applicable, for use by KDF. We have read and understand the Policies and Procedures of KDF regarding Grants, including the selected excerpts below. We affirm that we are in compliance with all KDF Policies and Procedures.

Signed by or authorized representative:

\_\_\_\_\_  
President

\_\_\_\_\_  
Secretary

Club/President: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
\_\_\_\_\_

----- **DO NOT mark below this line. For KDF office use only.** -----

Received on: \_\_\_\_\_ Comments or notes: \_\_\_\_\_

**RECEIPT AND REVIEW:**

Received on \_\_\_\_\_ . Acknowledged on \_\_\_\_\_

For review at meeting in:  October  April

Comments or notes:  
\_\_\_\_\_

**CLUB GIVING HISTORY:**

Current yr \$ \_\_\_\_\_ Last yr \$ \_\_\_\_\_ 2 yrs ago \$ \_\_\_\_\_ 3 yrs ago \$ \_\_\_\_\_

**KDF BOARD ACTION:**

- Approved. Letter and check sent on \_\_\_\_\_
- Denied. Letter sent on: \_\_\_\_\_
- Approved in part or with modifications or conditions.  
Approval terms: \_\_\_\_\_
- Letter with Approval Terms sent on: \_\_\_\_\_