The following Agency Request Form outlines required information for consideration of financial assistance through the Iowa Knights of Columbus People with Intellectual Disabilities Fund. Requests for assistance will be presented for consideration to the Iowa Knights of Columbus Executive Committee following receipt of this form and supporting documentation. The State Secretary will notify the Agency as to the outcome of the request.

**The completed Agency Request Form is to be emailed to** [***statesecretary@iowakofc.org***](mailto:statesecretary@iowakofc.org)

All questions concerning the completion and/or submission of the Agency Request Form are to be directed to the State Secretary via [statesecretary@iowakofc.org](mailto:statesecretary@iowakofc.org)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Agency |  | | | |
| Address |  | | | |
| City/State/Zip |  | | | |
|  |  | | | |
| Point of Contact |  | | | |
| Email |  | | | |
| Telephone |  | | | |
|  |  | | | |
| IRS 501(c)(3) Organization | YES |  | NO |  |
| Agency’s Purpose and/or Mission Statement |  | | | |
| Listing of Officers and Board of Directors |  | | | |
| Exact Dollar Amount of Request |  | | | |
|  |  | | | |

Request Narrative to include: (use additional paper as needed)

* Overview of project/program
* How will the money be used?
* Project/Program budget
* How many People with Intellectual Disabilities from how many counties in Iowa will benefit from this project/program?
* How will project/program objectives and results be achieved and measured?

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