

What is the process to apply?

LCIF expects to see a clear and concise action plan and will not fund unclear or vague project ideas. Please answer the following questions about the project.

1. Grant amount requested:
2. District/Undistricted Country:
3. Please list the Lions Clubs and Leo Clubs participating in the project. Also, indicate whether this is a district-wide project or led by a particular club:
4. Please indicate the name of the project leader, their club, and their email address:
5. Please provide contact information of key Lions and non-Lions who should be copied on future correspondence regarding this application:
6. Where will the project take place? Please name the primary city(s) or region:
7. What is the current situation for refugees in the project's target area?:
8. What type of help do the Lions plan to provide: Immediate needs/Transitional Needs/Integration Support/Reconstruction:
9. What is the project plan? Please explain what will be done, how the Lions will distribute the goods, how Lions will deliver the services, how Lions will identify the beneficiaries and the role of any partners:
10. How many refugees do the Lions anticipate will benefit from the project?

LCIF staff will follow up with the District Governor if further information or clarification is needed.

Eligible requests will be presented to the LCIF Chairperson for consideration. The district will be notified by email of the decision.

Certification by District Governor This is to certify that I have reviewed the LCIF Refugee Assistance grant criteria. I endorse the need for an LCIF Refugee Assistance grant and will do everything in my power to assure proper and efficient administration of the LCIF Refugee Assistance grant funds to purchase and distribute only those items and services deemed eligible by LCIF. In signing below, the District Governor acknowledges that the District will refrain from unlawfully discriminating on the basis of race, color, religion, creed, national origin, ancestry, gender, marital status, age, disability, veteran status or any other legally protected status.

Certification by the District Governor (Zone or Region Chairperson for Undistricted Countries)

District Governor (print name):

District Governor Signature:

Telephone Number:

Email Address: