

# Kugelman Family Foundation Grant Request Form

**Organizations Eligible to Apply  
for Funds Must Meet the Following Criteria:**

- Tax-exempt public charity under section 501(c) (3) of the Internal Revenue Code
  - Organization serves in ESCAMBIA County, Florida.
- Registered with the Florida Division of Corporations as a non-profit corporation
  - Application must be submitted by October 15th 2023

**Name of Organization \***

**Executive Director for Organization \***

**Mailing Address \***

 

**Total Amount Requested From Kugelman Foundation \***

**Please Explain In Detail What the Donation Will Be  
Used For \***

**Have You Received Money for This Project from  
Another Funding Source? If so, Where and How  
Much**

**Chairman of the Board of Directors**

**Board of Directors \***

**Percentage of the Board Who Have Contributed Financially Over the Last 12 Months \***

**Mission Statement \***

**Area(s) Served \***

**What Do You Hope to Accomplish With the Grant if Provided \***

**What is the Long Range Goal For This Funding \***

**Other Funding Needed (if any) To Complete This Goal**

**How Long Are You Anticipating to Complete This Goal/Project \***

**How Do You Plan to Recognize The Kugelman Foundation if Your Goal/Project is Funded \***

**Anything Additional/Special That You Would Like Us to Know About Your Organization**

**Is Your Organization a 501C3 \***

Yes  No

**If yes, What is Your 501C3 Number**

**This Request Was Prepared By \***

**Title \***

**Contact Email \***

Please note that by signing this form you are certifying the following information:

**We certify that, to the best of our knowledge, the statements contained in this application are true, correct and complete.**

**Executive Directors Signature**

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**Any Additional Information We Might Need To Review This Form Further**

or drag files here.

Submit

Save