



# Kiwanis<sup>®</sup>

## CLUB OF BANNER ELK

Post Office Box 2321, Banner Elk, North Carolina 28604

### **Woolly Worm Grant Application Information**

The Woolly Worm Grants are funded through Kiwanis fundraising events for the purpose of helping to fund special projects in local youth organizations and enhancing learning opportunities for Avery County School students.

#### **How to apply:**

1. Complete the grant application form.
2. The grant must be postmarked by October 25, 2025, to be considered.
3. Attach a description or printed summary describing your project, including the measurable objectives and how you will evaluate success.
4. Please show your budget for the project identifying the total fund source needs with detailed project expenses. If Kiwanis cannot fully fund your request, is it possible that matching funds will be provided to complete the funding for the project?

#### **How grant applications are awarded:**

Each application is based on its own merits and how the grant will impact the quality of education and experiences for the youth of Avery County. Woolly Worm grants will be awarded in two cycles, the first cycle in mid-December 2025, and the second cycle in late January of 2026.

Criteria that will be taken into consideration when awarding the grants are as follows:

1. The details of the written grant application description and goals for the project.
2. The number of students or children the grant will impact
3. The life or longevity of the product purchased with grant funding.

**Woolly Worm Grants are possible through the help of volunteers. Please consider volunteering for the festival to help make the fundraising efforts a success for all children.**

**Kiwanis Club of Banner Elk**  
**PO Box 2321    Banner Elk NC 28604-2321**

**Application for Woolly Worm Funds**

Form must be fully complete for consideration!

**Must be postmarked by Oct. 25, 2025**

Name of Organization \_\_\_\_\_ Date \_\_\_\_\_

Contact Person \_\_\_\_\_

Email \_\_\_\_\_ cell # \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Principal/superintendent/organization officer: \_\_\_\_\_

Attach a typed or printed summary describing your project, including measurable objectives and how you will evaluate success.

Please show an income/expense budget identifying total fund sources and detailed expenses.

Amount requested \_\_\_\_\_ Total project cost \_\_\_\_\_

If Kiwanis cannot fully fund your request, is it possible that matching monies could provide complete funding? \_\_\_\_\_

Please be aware that the purpose of Kiwanis International, and this club, is  
"To improve the quality of life for children and families worldwide."

Age range of the person(s) to be served \_\_\_\_\_ Number of person(s) benefiting \_\_\_\_\_

Duration of project \_\_\_\_\_

References: Name 2 local persons (not employees) who are familiar with your organization/project:

\_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_  
Phone \_\_\_\_\_

\*\*\*\*All school requests must be signed by principal or superintendent.\*\*\*\*

\*\*\*\*Organization requests must be signed by president/chief officer.\*\*\*\*

I understand that an evaluation report is expected by June 30, 2026 if this project receives Kiwanis support and if I wish to apply for more funding in 2026

Applicant signature \_\_\_\_\_ Officer signature \_\_\_\_\_  
Date \_\_\_\_\_

\_\_\_\_\_