



## **Karis Kares Donation Information**

Karis is a nonprofit organization committed out of gratitude for God's grace and love to help and serve others. Our mission is to recognize, nurture, and celebrate unique gifts that God has entrusted to our community by building a caring place that fosters changes in response to God's grace.

### **Eligibility:**

Organizations with a charitable or not-for-profit status that help and serve people are eligible to apply for a donation from Karis. Foundations and profit-based organizations are not eligible.

Donations will only be awarded to local nonprofits serving the counties of Augusta and Rockingham and the cities of Harrisonburg, Staunton, and Waynesboro. Up to forty percent of Karis' annual giving goes to mission work in other countries.

Organizations can only submit a request for funding once a year. Funds requested should support direct services to others. Requests for administrative and operating costs such as salaries, office rent, etc. will not be considered.

Karis' Board of Directors will review submitted applications quarterly. Donations will be awarded at the discretion of Karis' Board to organizations that fit Karis' mission. The purpose of Karis is to support the:

- Relief of the poor, underprivileged, or disabled
- Education and informational activities to increase public awareness of literacy, homelessness, and public health and safety
- Improvement of a better community environment for all

Any organization requesting a donation for the first time must complete the full two-page initial application. Organizations that have previously received a donation from Karis, and are applying for additional funds, can use the one-page continuation application form.

# Karis Kares Donation Application

## Organization Information

FEDERAL ID# \_\_\_\_\_ IRC Section# \_\_\_\_\_

Organization Name:

Mailing Address:

Website Address:

Date Organization Founded:

Please attach a brochure (if the organization does not have a website) and any supporting information.

## Employee Information

Applicant's Name and Position:

Phone Number:

Email:

## Organizational Goals and Needs

1. Who does the organization serve?
2. What is the organization's goal(s)?
3. Has the organization been successful in meeting its goal(s) in the past? Why/why not?
4. What services does the organization provide?
5. What are your major sources of funding?
6. Explain in 100 words or fewer why Karis should support the organization:

## Karis Kares Donation Application

7. What financial amount is sought and how will the money be used to support the organization's goal(s)? Please be specific with the amount of money requested and the intended use of the money. Note that donation funds can only be used for the purpose described here.

I agree, on behalf of the applying organization, that the funds requested will only be used for the purpose described, and that if the funds are not so used, they will be returned to Karis. I further agree, on behalf of the applying organization, to provide Karis (upon request) with a written summary or testimony of how the donation is used to support the organization's goals and how it helped the populations served.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Please complete and return the application to Karis by one of the following methods:

Mail: PO Box 155, Weyers Cave, VA 24486

Email: thekarisproject@gmail.com

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**To be used by Karis only**

Application Status: APPROVED / REJECTED / PENDING

Approval Date: \_\_\_\_\_ Donation Amount: \_\_\_\_\_

Comments: