

Foster Kidd Foundation

www.Fosterkiddfoundation.org

SCHOLARSHIP & GRANT REQUEST FORM

Name of individual (Organization): _____

Street Address: _____

City, State, Zip Code: _____

Mailing Address (if different): _____

City, State, Zip Code (if different): _____

Person Requesting: _____ Title: _____

Daytime Phone#: (____) _____ Alternate Phone #: _____

Statement of Request

Please indicate what the request is for and how it will be used. Also, state why *The Foundation* should consider this request. Please state (*in detail*) what the individual or organization does. Submit any supporting documentation that may assist the Board of Directors in making this decision. All requests will be answered in writing. Use additional paper if necessary. Please allow 30 days for responses for all request. **THIS REQUEST MUST BE SIGNED BELOW TO BE CONSIDERED.**

Send all requests to:

Foster Kidd Foundation

3818 Cedar Springs Rd.

Suite 101-358.

Dallas, Texas 75219-4168

or email request to:

Russ.Cuffee@tx.rr.com

I declare this request has been examined and all accompanying documents have been determined that to the best of my knowledge and belief all statements and information are correct, true and complete regarding this request for funding.

Official Signature: _____ Date Submitted: _____

Official Foundation Use Only

Approved: _____ Rejected: _____

Date Approved: _____ Date Rejected: _____

Foster Kidd Foundation

"Helping Youth Achieve Through Education"

3818 Cedar Springs Rd. Suite 101-358 ❖ Dallas, TX 75219-4168

The Foster Kidd Foundation is a 501(c) 3 non-profit, tax-exempt organization.

All members of this organization are strictly voluntary and are not paid through this organization for any of their efforts