

THE KYLE JEAN-BAPTISTE FOUNDATION INC.

P.O. Box 360154

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(718) 241-2370

kylejeanbaptistefoundation@gmail.com

Award Application

Date of application: _____

Name of individual to which award would be paid. Please list exact legal name:

Purpose of award (one sentence):

Address of individual: _____

Contact number: _____ E-mail: _____

Date Of Birth of youth: _____

Print name of youth: _____ Print name of parent or legal Guardian: _____

Explain the type of activity/purchase the award is for: (Be specific).

Award request: \$ _____

Name and ***Address*** of Business associated with Award Project:

Anticipated Date Range of Project/Activity: _____

Please state the date that the activity begins: _____

Qualifications of Business/Staff:

Explain why this award is appropriate for you/your child.

Please explain the need and why The KJBF should fund your activity over another.

Expenditure Verification:

- Original receipts.
- A contract on the program's letterhead.
- At the completion of the activity/endeavor, the youth benefitting from the funding will be asked to **provide a narrative** of the experience or expenditure (A Photograph/Video Release Form will be signed).
- In the case where the expenditure is an item, receipts and a narrative from the youth recipient will be requested as validation of purchase and use of funds.

Please Note: Inability to provide this verification will result in breach of the agreement signed with The Kyle Jean-Baptiste Foundation Inc. and funds must be repaid.