Kentucky Veterns Program Trust Fund
Office of the Commissioner
1111B Louisville Road
Frankfort, Kentucky 40601
(502) 564-9203
(502) 564-9240 (fax)
www.veterans.ky.gov

Date:

Name & Address of Requesting Organization:

Are You a 501 (c) (3) Organization ☐ Yes ☐ No IRS 501 (c) (3) Number

Name & Title of Contact Person:

Email Address: Phone/Fax:

Purpose of Organization & Services Rendered:

Total Project Cost: Amount Being Requested:

Agenda:

Purpose for Which Funding is Requested & How Will It Benefit Veterans:

List Funding Sources & Amountes Anticipated or Received:

If Sufficient Funds Are Not Raised for this Project, What Pleans Does the Organization Have for Completing the Project:	
Number of Veterans Directly Served By Your Organization In the Past 12 Months:	
What Are the Long-Term Plans for Supporting This Project? Please Provide Details:	
What Are The Learning Objectives of This Request:	

Each Request Shall Include:

Cover Letter / Program Description
Program Budget Detail
Agenda (if applicapble)