



2016-2017 GOVERNOR'S PROJECT CLUB BANNER PATCH AWARD APPLICATION

Submit to awards@floridakeyclub.org

DEADLINE: March 7, 2017

1. CLUB INFORMATION

Key Club of

Division: Zone:

(Information must be TYPED exactly as shown in the Florida Key Club Directory found at http://floridakeyclub.org/club-directory/)

Club President's Name:

President's Email:

Cellphone:

Faculty Advisor's Name:

Faculty Advisor's Email:

Cellphone:

School's Mailing Address

City:

State/Province: FL

Postal Code:

2. INSTRUCTIONS

To receive the Governor's Project Club Banner Patch, the club must complete at least three projects throughout the 2016-2017 Key Club administrative year in which they reflect the Feeding our Future Project. Feeding our Future is innovative and accessible to everyone, allowing for a bigger impact throughout the Florida District. With Feeding our Future, your club can work on projects that involve teaching children how to read, volunteering at a soup kitchen, and so much more.

Each Feeding our Future Project may be completed on a single day or on multiple days. Provide the project name, number of members who were involved, the number of service hours, the amount of funds raised (if applicable), the date(s) of this project, and Kiwanis Family involvement your club completed relating to the Governor's Project Feeding our Future. Please provide a briefly narrative description of each project on page 2 of this application.

3. PROJECT #1 INFORMATION

Project Name:

Project Date(s):

Number of Key Club Members Involved:

Number of Kiwanis Family Members Involved from each Kiwanis Family Clubs: 1. Kiwanis: 2. Aktion Club:

3. CKI: 4. Builder's Club: 5. K-Kids: 6. Key Leader:

Amount of funds raised: \$

4. PROJECT #2 INFORMATION

Project Name:

Project Date(s):

Number of Key Club Members Involved:

Number of Kiwanis Family Members Involved from each Kiwanis Family Clubs: 1. Kiwanis: 2. Aktion Club:

3. CKI: 4. Builder's Club: 5. K-Kids: 6. Key Leader:

Amount of funds raised: \$

5. PROJECT #3 INFORMATION

Project Name:

Project Date(s):

Number of Key Club Members Involved:

Number of Kiwanis Family Members Involved from each Kiwanis Family Clubs: 1. Kiwanis: 2. Aktion Club:

3. CKI: 4. Builder's Club: 5. K-Kids: 6. Key Leader:

Amount of funds raised: \$

6. FACULTY ADVISOR'S SIGNATURE

Faculty Advisor's Signature: _____ Date: _____

Without the signature requested above, your application will be automatically DISQUALIFIED for this award.

7. SUBMISSION

Submit your completed application electronically by March 7, 2017, to the Awards Committee at awards@floridakeyclub.org.

Please scan the application and attached it to the email.

Do NOT submit picture of the application for judging.

Please only submit one application per email to the Awards Committee.

Ensure that the subject line of the email is as follows: name of the award/ and your school's name.

Your application WILL BE DISQUALIFIED if any information requested is missing.

Application must be typed.

If you have any questions or concerns, contact the Awards Committee Chair at awards@floridakeyclub.org.



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KEY CLUB OF
Division:

PROJECT #1 NARRATIVE DESCRIPTION

Project Name:

Project Description:

PROJECT #2 NARRATIVE DESCRIPTION

Project Name:

Project Description:

PROJECT #3 NARRATIVE DESCRIPTION

Project Name:

Description: