SEEK, Haiti
Funding Approval Form

Organization Name	
Contact Person & Position	
Address	
City/State/Country/Zip	
Phone Number	
Email Address	

Project Name/Title:	**Approval Date:**	**Amount Granted: $**
	One Time: ☐ **Recurring:** ☐ **How long/many times?**	

Brief Description of Project ***(1-3 sentences)*****:**

Breakdown of Approved Costs* *(Please see Page 3 for additional items)*

***Sum of all areas may total more than the amount granted, allowing organization to allocate funds most preferably to these areas**

$	
$	
$	
$	
$	
$	
$	

Additional Amount Accepted as SEEK, Haiti Fundraising Goal*: $

***This goal is not a guarantee. SEEK, Haiti may not be able to provide these funds at any future point.**

Expected Duration/Completion of Project:

(Form continues on next page)

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Please describe the need for this project:

Please describe the purpose of this project ***(How will it address the need?)*****:**

(Form continues on next page)

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Please describe how/if the project will be sustainable to meet future needs:

Breakdown of Expected Costs *(Continued from Page 1)*

$	
$	
$	
$	
$	
$	
$	
$	

The nonprofit organization of SEEK, Haiti will provide to "Organization Name" the funds listed above under "Amount Granted" as listed on Page 1 of this document, in a timely manner, barring logistical difficulties wiring or otherwise sending the funds. SEEK, Haiti is not responsible for any loss, interception, bank difficulties, incorrect recipient information, or any other cause of the funds not arriving to "Organization Name". These funds are to be used as described in this document.

God's Blessings on your project,

Kara Weishaar, President
Alexander Scheiber, Treasurer