



Lions Clubs International  
**FOUNDATION**

LIONS CLUBS INTERNATIONAL FOUNDATION

# DIABETES GRANT APPLICATION





The Lions Clubs International Foundation (LCIF) Diabetes grant program offers financial support to Lions who seek to improve diabetes awareness, prevention and management initiatives in their communities. Lions are eligible to apply for grant funding up to US\$250,000 for impactful projects that enhance and expand diabetes camps; support comprehensive diabetes screening events; increase access to high-quality health facilities that provide diabetes services, and improve the knowledge of health care professionals. Lions are encouraged to partner with diabetes organizations within their district to achieve this goal.

## LIONS CLUBS INTERNATIONAL FOUNDATION:

In 2017, Lions Clubs International celebrated its centennial year of service as an organization by adopting diabetes as one of its new global causes. A strategy was developed along with this new call to action in order to guide Lions clubs members to provide service within the area of diabetes in the best possible ways. This strategy highlights the following vision and goals for Lions' work within diabetes.

**VISION:** "Reduce the prevalence of diabetes and improve the quality of life for those diagnosed"

**Goals:**

- Educate Lions and their communities about diabetes and prediabetes.
- Develop community environments that inspire and support healthy lifestyles.
- Increase access to diabetes care, medication and diagnostic equipment.
- Increase coordination and support in the implementation of national diabetes policies and plans.

The LCIF Diabetes grant has an expansive reach, one that will help Lions interested in having a societal impact on the diabetes epidemic. LCIF's diabetes focus will be placed on large-scale diabetes prevention, management, awareness and service projects that have the potential to improve the public health of a community. More specifically, the Diabetes Program will support projects that fall within one of the following intervention areas:

- Large-scale fixed facility or mobile screening initiatives which target at-risk communities/individuals when combined with comprehensive follow-up care by qualified medical professionals. Use of diabetes risk assessments and diabetes education is required.
- Enhancement and expansion of existing diabetes camps, retreats, and symposiums.
- Health facility expansion through renovation and equipment acquisition to improve existing infrastructure and increase patient access to existing diabetes services.
- Initial or refresher training of qualified health personnel who work with people living with diabetes/prediabetes, and/or the training of Lions as community diabetes educators.

Funds are also available for public awareness initiatives and support groups so long as these activities are incorporated into one of the four aforementioned intervention areas.

It is recognized that not all of Lions' ideas will be able to be supported by this foundation program. The good news is that LCIF and Lions Clubs International have funds available through other programs. These are:

- **SightFirst:** Supports diabetic retinopathy projects set within a comprehensive eye care approach.
- **Community Impact Grants:** Helps clubs and districts support small-scale community projects using a share of their donations to LCIF.





# GUIDELINES

Please review the LCIF Diabetes Grant criteria and regulations before completing this application. All information requested below must be provided to LCIF to determine eligibility for funding consideration. Applications are received on a rolling basis, but must be received at least 90 days before a scheduled LCIF Board of Trustees meeting. These meetings occur annually in August, January and May. Please refer to the website or contact LCIF for specific application deadline dates.

The LCIF Board of Trustees and LCIF Global Health Initiatives staff reserve the right to request additional pertinent information as needed. If additional information is required, a request for clarification will be sent to the corresponding District Governor, Multiple District Council Chairperson, or project chairperson.

LCIF will acknowledge receipt of the application via email. This email will provide a grant tracking number for your reference when communicating with LCIF about the application. Proposals formatted for other agencies or Power Point presentations created for general fundraising campaigns will not be accepted.

Questions regarding the Diabetes Program’s grant criteria and the application process should be directed to the Global Health Initiatives Department at LCIF at [diabetesgrants@lionsclubs.org](mailto:diabetesgrants@lionsclubs.org).

INTERVENTION AREAS	PROJECT DESCRIPTION
Diabetes Camps, Retreats, and Symposiums	<p><b>Definition:</b> Organized community groups and activities designed to encourage interaction and education among peers in a positive and medically safe environment.</p> <p><b>Options:</b> Traditional overnight camps, day camps, retreats or symposiums organized in facilities that can accommodate organized groups. Camp sessions may range in duration from short-term day camps or retreats to week-long sessions.</p> <p><b>Goals:</b> To promote diabetes self-management and health education including: self-care, peer learning, medication administration, nutrition, moderate physical activity, positive life-style and behavior changes, and wellness.</p> <p><b>Eligible expenses:</b> General operating expenses for running camps or retreats (medical personnel per diems, programmatic expenses, and consumables), and facility upgrades and renovations to existing camps to expand programs and services.</p> <p><b>Ineligible expenses:</b> Individual sponsorship/scholarships, cost of participant travel to camp, and new construction and camp establishment.</p> <p><b>Metrics:</b> Applicants should be prepared to track comprehensive output indicators such as: number of attending campers, number of medical professionals trained, and number of classes/sessions supported.</p>



<b>Diabetes Screening Activities with Comprehensive Follow-Up Care</b>	<p><b>Definition:</b> Diabetes screening is an awareness-raising and education event for the community organized in partnership with healthcare professionals. Comprehensive referral networks and support services must be in place to ensure participants have access to follow-up care.</p> <p><b>Options:</b> Individual or a series of diabetes-specific comprehensive awareness and health education and screening events for populations at sufficiently high risk of diabetes to warrant further investigation or direct action. Screening event support requests may be combined with other eligible components like human resource development.</p> <p><b>Goals:</b> Significantly increase the number of individuals and communities in underserved areas that are aware of diabetes and its complications, and the number known and previously unknown persons with diabetes who gain access to comprehensive management and control services.</p> <p><b>Eligible expenses:</b> Logistical expenses, medical personnel or counselor per diem, facility rental, and screening consumables (as long as it is not the only project expense).</p> <p><b>Ineligible expenses:</b> Per-patient costs/subsidies/reimbursements and expenses for general, non-diabetes specific screening events.</p> <p><b>Metrics:</b> Applicants should be prepared to track comprehensive output indicators such as: number of people screened for diabetes, number of people referred to medical professionals for additional testing, and number of people with confirmed diagnosis of pre-diabetes or diabetes referred to health care programs for prevention or management and control.</p>
<b>Diabetes Care Infrastructure Development and Equipment Acquisition</b>	<p><b>Definition:</b> Improve healthcare access through support of infrastructure development and equipment acquisition. This project type is often paired with related activities, such as human resource training.</p> <p><b>Options:</b> Support for spatial improvements and equipment needs of primary and secondary health institutions. It is anticipated that this project type will be often paired with related activities such as human resource training.</p> <p><b>Goals:</b> Improve the quality and quantity of diabetes and diabetes-related services provided to underserved populations. Improve the sustainability of diabetes service-oriented health institutions.</p> <p><b>Eligible expenses:</b> Renovation of existing infrastructure, purchase of major medical equipment that is used for the care of diabetes and/or its associated co-morbidities.</p> <p><b>Ineligible expenses:</b> Establishment of new medical facilities and operating expenses (rent, land acquisition).</p>
<b>Human Resource Training and Capacity Building</b>	<p>Training and capacity building to establish or expand medical, clinical, or other professional-level expertise. Projects may also seek to train Lions as community diabetes educators. Trainings should be organized locally. Priority will be given to countries that have a high prevalence of diabetes and a demonstrable need for health care personnel with a background in diabetes prevention, management and control.</p> <p><b>Options:</b> Training of Certified Diabetes Educators, Counselors/ Instructors/ Qualified Health Personnel affiliated with diabetes centers of excellence. Upgrading of diabetes treatment knowledge and skills for general practitioners and nurses.</p> <p><b>Goals:</b> Increase knowledge in diabetes-related subject matter to learn and communicate new approaches for engaging individuals (and communities), to increase competencies and to promote diabetes prevention and management.</p> <ul style="list-style-type: none"> <li>• Training in health and therapeutic programs for diabetics and pre-diabetics</li> <li>• Technical and education based certification for diabetes education, prevention and management</li> <li>• Professional development in multi-disciplinary sectors related to diabetes</li> </ul> <p><b>Eligible expenses:</b> Tuition, stipends, transportation, and other expenses associated with medically-supervised training programs.</p> <p><b>Ineligible expenses:</b> Salaries of the newly trained professionals upon their return to their home institution.</p>

## BASIC INFORMATION

1. Project title
2. Project location (city, district, country)
3. Total project budget
4. Amount of funds requested from LCIF
5. Project duration
6. Project goal
7. Specific project objectives
8. Number of people who will directly benefit from this project
9. Lions district, sub-district or multiple district submitting the project
10. Number of Lions clubs directly participating in the implementation of the project
11. Collaborating partners/organizations/institutions
12. Contact information for the primary project coordinator(s) including: name, telephone, and e-mail address

When creating project objectives, please include the following:

1. What do you want to accomplish/change?
2. What will be the quantitative impact of the project?
3. Who is targeted by the project?
4. Where will this project take place?
5. When will the outputs be achieved by?

## PROJECT ENVIRONMENT

13. Provide information on the project area.
  - According to the most recent census, what is the population of the targeted project area?
  - What is the prevalence of diabetes in the project area (please site data source)?
  - Please identify and explain the predominant barriers to accessing diabetes care in the project area.
14. How is diabetes care organized at both the national level, and in the target area for the project (if different)?
  - Please describe the current availability and quality of public and private diabetes care services in the project area.
  - If a national diabetes or non-communicable disease prevention plan is being implemented in the project area, how does this project align with that plan?

## PROJECT DESCRIPTION

15. Please include a description of the groups targeted by this project and why they were selected.
16. Indicate who the project stakeholders are, including the implementing partners and technical contributors.
  - Provide a brief history of each project partner and/or technical contributor.
  - Describe each partner's roles and responsibilities.
  - Include letters from each partner organization endorsing the project and noting their roles and involvement.
17. Indicate the expected number of people who will be reached during the project. Please note the outputs of the project should be measurable, achievable, and clearly support the project objectives and activities.

18. The following supplementary questions ask applicants to provide more detail, explanation and analysis on specific project activities. Applicants are required to answer the questions from each intervention areas targeted by their project.

#### **A. Diabetes Camps, Retreats, and Symposiums**

Please provide information on the history, accomplishments and goals of the initiative, including:

- Demographics of attendees (Type 1, Type 2)
- Medical institution partner description.
- List of health personnel available to assist with camp supervision and/or implementation.
- Provide an example of the camp curriculum. Include daily topics covered and camp activities.
- Explain post-camp services and follow-up plans, including assessments and surveys. Please note that camp organizations without a track record of success are ineligible for support unless technical guidance is provided by an experienced institution, and the relationship is codified through a formal agreement.
- Detail the mentoring and oversight services to be provided by the mentor organization, and the period of time these services will last.

#### **B. Diabetes Screening Activities with Comprehensive Follow-Up Care**

- Please specify how many screening events are planned.
- Describe the roles, responsibilities and qualifications of the medical partners involved in the screening. Highlight particular experience in the prevention, management and/or control of diabetes.
- Provide a detailed plan of the protocol to be followed to ensure that people who are screened and found to be diabetic, pre-diabetic, or otherwise at risk, are given appropriate follow-up care. This should include who will provide the follow-up care, how will they ensure that the people are reached, how the care will be funded, and how outcomes will be tracked to demonstrate a continuum from screening, to intervention or treatment, to post intervention or treatment.
- Medical partners who commit to providing follow-up care should have their commitment documented via an MOU (or similar document) with the Lions who are implementing the screening program. It should be specific and ideally include an estimated financial cost to providing the follow-up care.

#### **C. Diabetes Care Infrastructure Development and Equipment Acquisition**

- Provide copies of facility blueprints for any proposed facility renovations/expansions. Include a narrative justification for the proposed facility enhancements, if not already explained in the project objectives.
- Provide a current equipment list (including the age/status of the equipment) and a requested equipment list. Include a narrative explanation for the need of the requested equipment.

#### **D. Human Resource Training and Capacity Building**

Please explain what type of specialized education, training, certification or accreditation is planned:

- Provide information on the program or organization that will provide the training. Trainings should be provided by an accredited or recognized organization or entity with a focus on diabetes –related care or an associated sub-specialty.
- Outline the training program specifics (i.e. education plan, training timeline, competencies and skill set to be achieved).
- Detail the need for this specialized education or training as it applies to the broader community needs and this overall project.
- At the conclusion of the project, how will this training be further utilized to extend the impact of diabetes care in the community?

## LIONS IDENTIFICATION AND INVOLVEMENT

19. What will the role of the Lions be in project management, fundraising, promotion, advocacy, and project implementation? How many Lions clubs will be involved in the project? Please list the specific roles/responsibilities of these clubs.
20. Please describe plans for identifying the project as having been made possible by LCIF. Please note that any publicity materials and media regarding the project should acknowledge the support and involvement of both LCIF and the Lions.

## MONITORING AND EVALUATION

21. Describe the planned monitoring and evaluation of project activities:
- How will each project activity be monitoring and evaluated?
  - Who will be responsible for monitoring and evaluation, how often, and for how long?
  - How will the data and results be used to improve the project/program?
22. If applicable, please include copies of any surveys or evaluations that will be used during the course of the project.

## PROJECT TIMELINE, BUDGET, AND SUSTAINABILITY

23. Complete an itemized budget, using the template below, which covers anticipated income and expenses for the entire project.
- Submit the budget in US dollars.
  - Individually list all project expense items and note who will cover which portion of those costs.
  - Include the amount that each source (District, LCIF, government partner, etc.) is providing and indicate the status (collected, pledged or anticipated). For pledged and anticipated amounts, indicate the date by which the funds will be readily available for the project. For collected amounts, please provide a signed MOU and bank statement for verification.
  - Include appropriate documentation for the expense items listed in the budget. For each item in the expense column, include pro-forma invoices, price quotations, cost estimates for renovation works, including construction blueprints, and/or other budget documentation.
  - Provide a budget narrative for each of the items listed under project expenses. Justify why each item is needed and the associated cost.

Local matching funds must be in the form of cash contributions and at least half of the local matching funds must be raised by the Lions submitting the grant application.

If approved, the Lions must show proof that 25% of their local match has been secured prior to requesting the first LCIF disbursement.

Income				Expenses			
Source	Amount	Status	Notes	Expense Description		Amount	Explanation of Expense
Lions				1			
				2			
Partners				3			
				4			
LCIF		Anticipated		5			
				6			
Total	\$0.00				Total	\$0.00	

24. Explain how the project will be sustained in future years. Describe who will be responsible for operation, maintenance, and administrative expenses.
25. Please include a timeline for project implementation and completion.



## APPLICATION ENDORSEMENT

1. Cabinet or council certification must be included with every grant application. Please submit a copy of the cabinet (single or sub-district) or council (multiple district) meeting minutes at which the application was certified.
2. For single and sub-districts, only the **district governor must sign** the application (please refer to the grant regulations).
3. For multiple districts, only the **council chairperson must sign** the application (please refer to the grant regulations).

### PROJECT CHAIRPERSON SIGNATURE

This to certify that I have reviewed the LCIF Diabetes grant criteria and grant application. To the best of my knowledge the information submitted is accurate and the need exists as indicated. I endorse this proposal and will do everything within my power as administrator of any funds granted to assure their proper and efficient use, proper accounting and regular reporting to Lions clubs international foundation.

Project Chairperson Name	District Number
Telephone	Email
Signature	Date

### DISTRICT GOVERNOR'S ENDORSEMENT (SINGLE AND SUB-DISTRICT LEVEL GRANT APPLICATIONS)

This to certify that I have reviewed the LCIF Diabetes grant criteria and grant application. To the best of my knowledge the information submitted is accurate and the need exists as indicated. I endorse this proposal and will do everything within my power as administrator of any funds granted to assure their proper and efficient use, proper accounting and regular reporting to Lions clubs international foundation.

District Governor Name	District Number
Telephone	Email
Signature	Date

### COUNCIL CHAIRPERSON ENDORSEMENT (MULTIPLE DISTRICT LEVEL GRANT APPLICATIONS)

This to certify that I have reviewed the LCIF Diabetes grant criteria and grant application. To the best of my knowledge the information submitted is accurate and the need exists as indicated. I endorse this proposal and will do everything within my power as administrator of any funds granted to assure their proper and efficient use, proper accounting and regular reporting to Lions clubs international foundation.

Council Chairperson Name	Multiple District Number
Telephone	Email
Signature	Date

# DIABETES GRANTS CRITERIA AND REGULATIONS

## FUNDING AND LEVELS OF SUPPORT

Diabetes grants are awarded from US\$10,000 up to US\$150,000 for single district projects and up to US\$250,000 for multiple district projects. Applications are eligible to request LCIF support with up to 75 percent of the total project budget. See regulation number 13 of the Diabetes Program grant criteria.

## DEADLINES

The LCIF Board of Trustees reviews all eligible Diabetes grant applications three times per year (May - August - January). Applications are received on a rolling basis, but must be received at least 90 days prior to the scheduled board meeting and meet all criteria to be considered. Please visit [www.lcif.org](http://www.lcif.org) to see grant deadlines.

## LCIF DIABETES GRANT CRITERIA

1. Grants are considered for projects exceeding the financial resources and fundraising capabilities of the applicant Lions multiple district, district, and participating clubs. There must be at least two clubs involved in the financial support and implementation of the project.
2. Projects should foster activities and programs that are supportive of national diabetes goals.
3. Initiatives should work in alignment and develop partnerships, as needed, with national and local health organizations, health facilities, diabetes advocacy associations, universities and school systems.
4. Projects should serve many people, and ideally entire communities, to maximize the charitable impact of LCIF funding. Additionally, priority is given to projects serving the under resourced sectors of society and demonstrating financial need.
5. Projects must possess a high degree of sustainability and reasonably ensure continued operation upon conclusion of LCIF funding.
6. Projects that seek LCIF funding shall have a strong Lions identity and ongoing involvement of local Lions. Priority is given to projects in which Lions provide volunteer services, have a track record of previous support, and a clearly identifiable role in helping administer the project and/or institution involved.
7. Grants may not be requested for construction of new hospital facilities/ medical clinics. Priority will instead be given to projects aiming to upgrade and expand existing health care facilities.
8. Diabetes grants are not available for projects more appropriately addressed through other LCIF grant programs. Diabetic retinopathy focused projects should be referred to the SightFirst program. Information on other foundation programs is available at [www.lcif.org](http://www.lcif.org) or by contacting LCIF.
9. Grants will not be approved on a continuing basis to any single project. Projects or institutions receiving a Diabetes grant must wait one year after submission of the final grant report before applying for a new grant if the previous grant for the same project has met its objectives.

## ELIGIBLE PROJECTS

- Diabetes camps, retreats, and symposiums
- Diabetes screening activities with comprehensive follow-up care
- Diabetes care infrastructure development and equipment acquisition
- Human resource training and capacity building

## INELIGIBLE PROJECTS

- ✗ Scientific or clinical research
- ✗ Start-up initiatives
- ✗ Establishment of new patient care facilities
- ✗ Single club projects
- ✗ Purchase of land and buildings
- ✗ Travel grants for conferences, workshops, meetings, etc.
- ✗ Individual assistance
- ✗ Projects more appropriately funded by the government or other institutions
- ✗ Projects taking place outside of the applicant district or country

10. Each grant application is judged solely on its own merit and the degree to which it meets the criteria and the humanitarian funding priorities of LCIF as established by the Board of Trustees.
11. Funding for operating expenses may be included as part of a project budget and grant request, but only when such funds would be used to initiate or significantly expand services of the applicant organization. The applicant must demonstrate how such operating expenses will be sustained once LCIF grant funds are expended.
12. In addition to Lions' involvement and identity with the project, the applicant Lions district or multiple district and participating clubs must make a significant financial commitment to the project. While the clubs involved may not contribute equal amounts in local matching funding, the amounts should be comparable to demonstrate that the project is not primarily funded by a single-club. (Note: projects with the financial support of only one Lions club are not eligible.)
13. Lions must raise local funding in the form of cash contributions equivalent to 25 percent of the total project budget. If partner organizations or corporations provide funds to support the project, their cash contributions can only count towards a maximum of 50 percent of the local matching funds required. In other words, Lions themselves must raise a minimum of 12.5 percent of the total project budget in the form of cash contributions.
14. The local matching funds may only be in the form of cash contributions. In-kind donations, whether land, labor or materials, from Lions and/or partners will strengthen the proposal and should be highlighted in the project write up, but such in-kind support may not be included in the budget as part of the matching funds toward the LCIF grant. Additionally, local matching funds must represent cash available or pledged for the current project being proposed.

## **LCIF DIABETES GRANT REGULATIONS**

1. Grant applicants must submit their project proposals on a LCIF Diabetes Grant Application form. The application form will need to be completed in its entirety to be reviewed by LCIF staff. The project budget must clearly itemize all project income sources and expense items and project income must equal expense. Incomplete applications or proposals submitted in other formats are ineligible.
2. Grant applications must be received in the LCIF office, in completed form, at least 90 days before an LCIF Board of Trustees meeting to be considered at that meeting. The meetings are held in August, January and May; deadline dates may be found on the LCIF web page or by contacting LCIF directly. Since additional information is frequently requested, submitting an application well before a deadline is advised. Please note that submitting an application prior to the application does not guarantee that the grant will be presented at the next Board of Trustees meeting. Applications may need to undergo significant revisions prior to being presented to the Board of Trustees.
3. Grant applications should include signed letters of support from all project collaborating partners. The letter(s) shall explain the role of the collaborating partner in relation to the proposed project and clearly state the nature of their support (resources, personnel, cash, in-kind, etc.).
4. Applications previously withdrawn or rejected may be resubmitted only if they have been revised to address the reasons for being tabled, denied or withdrawn.
5. Grant proposals may be submitted by any Lions district (single, sub or multiple). Priority will be given to higher-impact projects at the regional, state or province level. Applications submitted by single or sub-districts must be signed by both the current district governor and council chairperson and be certified via resolution by the district cabinet and thereafter with notification to the council chairperson. Multiple district applications shall be signed by the council chairperson and certified via resolution by the council of governors. Appropriate cabinet or council meeting minutes at which the application was certified must be submitted. These minutes must be from the Lions fiscal year in which the application will be reviewed by the LCIF Board of Trustees. For applications and projects that continue into a new Lionistic year, the D/MD is responsible for ensuring that the current cabinet or council is kept informed of the project progress.
6. The district governor or multiple district council chairperson in office at the time the grant is approved shall serve as grant administrator for the life of the project. It shall be his/her responsibility to establish a special bank account set-up specifically for this project and disburse funds to project partners and vendors. If a project is carried over into a new fiscal year, the grant administrator must provide copies of progress and final project reports submitted to LCIF to the current district cabinet or multiple district council. LCIF reserves the right to replace grant administrators as necessary.

7. Applications from a district or multiple seeking to implement a project outside of the applicant district/country will be considered on a case-by-case basis. Other opportunities exist through other grant opportunities, such as LCI mini-grants and the district sharing program, to support such projects.
8. LCIF Diabetes grants are awarded from US\$10,000 up to US\$150,000 for a single district and US\$250,000 for multiple district initiatives, and should not exceed more than 75 percent of the total project cost. Priority will be given to projects that employ cost-effective strategies, and thus the upper limit of grant funding should only be requested for projects that will impact a large region or serve a large number of beneficiaries.
9. Only two LCIF Diabetes grants can be open and active per district at any given time. For districts that include several countries, the limit is two grants per country. At the multiple district level, only one Diabetes grant can be open and active at a time. Applications that are incomplete or require additional time for clarification of details may be held over for review at a later board meeting.
10. The appointment of a steering committee, consisting of Lions, local diabetes and health authorities, and other key projects stakeholders should be established. This committee will oversee and ensure successful implementation of the projects.
11. Grants are not available for operational expenses and salaries of an existing program. However, in some cases, a modest portion of the budget can assist with these administrative costs for projects seeking to initiate or significantly expand an initiative. A plan for sustainability of such costs, once LCIF funding is completed, must be submitted with the grant application.
12. Grants are not available for the construction of new diabetes health care facilities. Priority will instead be given to projects aiming to upgrade or expand existing clinics/hospitals. In the case of communities where health care facilities are scarce or nonexistent, grants may be available for the construction of new clinics to be administered in conjunction with established medical institutions or organizations.
13. Lions and/or their families should not receive direct or professional benefit or have proprietary interest in projects receiving LCIF assistance.
14. Grant recipients are responsible for submission of narrative and financial reports detailing project progress and the exact use of LCIF funds at least every six months. Reporting forms are issued with grant award letters. Multiple districts or districts failing to submit interim reports risk having their grant cancelled. Failure to submit final reports may result in the future ineligibility of that district or multiple district to receive additional grants.
15. Approved grant-funded projects shall be implemented in a reasonable timeframe. After sufficient consultation with the district, LCIF retains the authority to rescind grants that are either not initiated or not making sufficient progress in a reasonable amount of time. Any disbursed funds that are not adequately documented shall be returned to LCIF if the grant is rescinded.
16. Applicants failing to answer correspondence from LCIF on their application within 120 days will result in their application being ineligible for consideration and withdrawn.

### 1. Who can apply for Diabetes grants?

Lions districts and multiple districts can apply for Diabetes grants.

### 2. Would a project that has started or is completed qualify for funding consideration?

Diabetes grants are only available for projects that are not yet underway. If the project that LCIF is being asked to fund has started or is completed, the request is ineligible. Grants are not provided on a reimbursement basis. When submitting Diabetes grant applications, it is important to consider the project start and completion dates, as well as the timing of the three annual LCIF Board of Trustees meetings where decisions are made on grant applications.

### 3. How many clubs must financially support a Matching grant project with local matching funds?

At a minimum, two clubs must make a significant financial contribution to the project by securing and/or raising local matching funding. Ideally, many more clubs are involved in the development and execution of the grant project.

### 4. Can donations-in-kind qualify as local matching funding?

Local matching funding in the form of cash is required by the district or multiple district that is applying for the grant. In-kind donations are appreciated, but are not admissible towards the local Lions match. Additionally, Lions volunteer time with the project may not be converted to cash value. The local match must be new funds specifically raised for the project for which the LCIF grant has been approved. Furthermore, the Lions grantee district or multiple district must provide evidence to LCIF staff (via bank statements) demonstrating that the local match has been raised and/or expended.

### 5. Is there a grant award minimum and/or maximum?

Diabetes grants are awarded from US\$10,000 up to US\$150,000 for single districts projects and up to US\$250,000 for multiple district projects. Applications are eligible to request LCIF support with up to 75 percent of the total project budget.

### 6. How many Diabetes grants can a district or multiple district apply for?

Only two LCIF Diabetes grants can be approved and active per district at any given time. For districts that include several countries, the limit is two grants per country. At the multiple district level, only one Diabetes grant can be approved and active at a time. Once an approved grant is closed by the submission of a satisfactory final report, the district or multiple district is then eligible to apply for a new LCIF diabetes grant. Please reference LCIF Diabetes Grant Regulation #9.

### 7. What are the application deadlines?

Applications may be considered at the LCIF Board of Trustees meeting three times per year in August, January and May. Applications must be received at LCIF no less than 90 days before the board meeting date. Please refer to the LCIF website for specific deadline dates. It is recommended that applications be submitted well in advance of the application deadline. Applications that are incomplete or require additional time for clarification of details may be held over for review at a later board meeting.



**8. What is the process once the application is submitted to LCIF?**

LCIF will acknowledge receipt by email or letter. This communication from LCIF will confirm the receipt date, identify the LCIF Regional Program Specialist that will provide the preliminary review (to determine eligibility) and provide a tracking number for the application. The specialist will follow-up with the district or multiple district with any questions to clarify the goals and objectives of the project. There could be a few questions or several as the specialist works to determine the eligibility of the application and project. In some cases, Lions may be asked to revise the proposal to more closely meet the grant criteria. Lions may be given a deadline by which to respond. Only applications that are complete and eligible will have the opportunity to move forward for review by the LCIF Board of Trustees.

**9. What are the possible outcomes from the Board's decisions?**

The board may approve a grant (at the full request or a reduced amount), table a grant (pending the need for more information or revision), or deny a grant request. A grant that is tabled is neither approved nor denied, as additional information is required before a decision can be made.

**10. If the grant is approved, how long will it take to get the grant funds?**

Grant approvals often come with grant conditions. The primary conditions for Diabetes grants include: 1) signing and returning the grant agreement, and 2) verifying that at least 25% of the local matching funds have been raised. Other conditions may be placed on grants, as the board deems appropriate. LCIF will not release the grant funds until all grant conditions are fully met. Lions have six months from the approval date to collect at least 25% of the required local matching funding.

**11. If the grant is approved, what is the process for requesting an LCIF disbursement?**

Once the grant agreement has been signed, Lions have six months to raise the first 25% of their pledged local matching funds (if not already raised). Once the first 25% of the Lions/partner local match is raised and adequate evidence is provided to LCIF staff, the Lions can then request the first LCIF disbursement amounting to no more than 25% of the LCIF grant. For subsequent disbursements, the Lions must continue to provide LCIF staff evidence that an additional 25% of their local match has been raised prior to requesting additional LCIF disbursements.

**12. Who is responsible for managing the grant funds for approved grants?**

The grantee district or multiple district is responsible for the grant and the District Governor (for a district level grant) or Council Chairperson (for a MD level grant) in office at the time a grant is approved is considered the grant administrator. The grant administrator is responsible for ensuring that the grant funds are properly utilized for the purpose approved by the board. The grant administrator is also responsible for ensuring that LCIF and the appropriate cabinets receive timely final reports upon the completion of the grant project.





**Lions Clubs International**  
**FOUNDATION**

Lions Clubs International Foundation  
Global Health Initiatives Department  
300 W. 22nd St. | Oak Brook, IL 60523-8842 USA  
630.468.7031 | [Diabetesgrants@lionsclubs.org](mailto:Diabetesgrants@lionsclubs.org)  
[www.lcif.org](http://www.lcif.org)