

Kauai Independent Food Bank
Application – KIFB Program and Agency 2023



Program or Agency Name

Food Service Distribution Type (Refer to: Overview – KIFB Program and Agency 2023)

Programs – Keiki Café, Backpack, Kupuna Homebound Delivery.

Agencies – Food Pantry, Food Box Delivery, On-Site Feeding Event, On-Site Distribution Event.

Organization Information

Organization Name

Physical Address

Mailing Address

Phone Number (Main Line)

Principal Officer/ Agency Director - Print

Signature & Date

Program and Agency Information

Coordinator (Person of Contact) - Print

Signature & Date

Phone Number (Direct Line)

Email Address

Kauai Independent Food Bank
Application – KIFB Program and Agency 2023

Program or Agency Description

Describe what your organization does in daily operations. What is your mission?

What do you consider the overall goals of your organization?

Food Service Description

(Programs Only) How many people will receive foods at each distribution?

(Agencies Only) Distribution numbers will change determined on need. Please estimate the average amount of people to be served per month.

Describe the demographics of the clients your program serves?

Programs, describe the schedule, time, and locations of distributions.

Agencies, provide detail as to what type of food services will be offered and how it will operate and be advertised. *Please include any other important information here.*

Describe the impact that KIFB will make toward your organization.

Kauai Independent Food Bank
Application – KIFB Program and Agency 2023

Volunteer Interest

KIFB relies on its agencies to help carry out our mission of feeding the hungry on Kauai. On many occasions we need volunteers to help our cause. Please check if your program or agency would like to assist when possible.

- Interested in hosting a food and fund drive? _____
- Interested in volunteering at food bank warehouse? _____
- Interested in volunteering at food bank special events? _____
- Interested in writing a letter of support? _____
- Interested in conducting surveys on provided food services? _____
- Interested in conducting surveys on food accessibility and needs? _____
- Interested in putting up resource flyers provided by KIFB? _____
- Interested in helping KIFB in other ways? Let us know! _____

Start and End Dates

If your program or agency is year-round, please indicate that here.

Program or agency services **start** date for the year _____

Program or agency services **end** date for the year _____



Thank you for your interest in being a partner to the Kauai Independent Food Bank. Please contact us if you have any questions, need more information about our operations, or need assistance through the application process. kawaigampon@kauaifoodbank.org or 808-278-6118. Please submit applications and required paper work to the above email, mail or in person, at the KIFB warehouse located 3285 Waapa Rd. Lihue, HI, 96766.

Sign below to acknowledge the reading of *Overview – KIFB Program and Agency 2023* (available at kauaifoodbank.org) as well as the full review and completion of the above *Application – KIFB Program and Agency 2023*.

Program or Agency Name

Coordinator - Print

Signature and Date