



Cosmopolitan International

The Club that Fights Diabetes
Diabetes Alert Dog
Cap Grant Application



Personal Information <i>(provide name of Dog Applicant)</i>				
Last Name		First Name		Middle Initial
Address		City		State/Providence
Postal Code		Phone		Date of Birth
Email				

Household Information <i>(provide member count and names)</i>					
Fathers Name		Phone		Diabetic (Circle)	Yes No
Mothers Name		Phone		Diabetic (Circle)	Yes No
Sibling 1 Name				Diabetic (Circle)	Yes No
Sibling 2 Name				Diabetic (Circle)	Yes No
# Dogs in Home				# Cats in Home	
Household Income (circle)	Less than 25,000	Between 25,000 – 50,000	Between 50,000 – 75,000	Between 75,000 – 100,000	More than 100,000

DAD Trainer/Provider <i>(provide information for the provider of the dog)</i>				
Company				
Address				
City		State		Zip
Email		Phone		
Trainer	Dog Breed			
Dog Total Cost (\$)	Dog Age			
Raised to Date (\$)	Date Available			

Medical Information <i>(provide name and distance from home)</i>			
Primary Physician		Miles	
City, State		Phone	
Closest Hospital/Clinic		Miles	
City, State		Phone	

How would the Diabetic Alert Dog improve the quality of life for the diabetic?
(attach additional pages if needed)

Information below this line is to be provided by the Grant Committee after submission

Sponsoring Club (to be filled out by Grant Committee...)			
Club Name		Address	
City		State/Providence	
Postal Code		Primary Contact	
Email		Club Donation	