Community Enrichment Team - Product Donation Request Form

Today’s Date:

Name of Charity/Nonprofit:

Current Address:

City, Prov., Postal Code:

Contact Name and Position:

Phone Number and Ext.

E-mail Address:

Charity's Website:

Registered Charitable Number:

Please answer all questions on this form completely and provide all information that has been requested. Your completed Product Donation Request Form should be submitted in word or pdf format and sent to the Canadian Region Community Enrichment Team via e-mail to CAenrich@scj.com

Select a Category that Applies To Your Organization:

☐ Education
☐ Health & Wellness
☐ Environment & Sustainability
☐ Social Services
☐ Community & Economic Development
☐ Arts, Culture and Humanities

Select Geographical Impact of the Charity:

☐ Local
☐ Provincial
☐ National

Please select what type of Product Donation you are requesting:

☐ Gift Bag of SC Johnson Product (Only one Gift Bag per organization, per year)
☐ Other ____________________________ (Please indicate)

Please provide a brief history of the charity including its current mission and vision? What need within the community is the charity currently fulfilling?
Describe the reason your organization is requesting a SC Johnson Product Donation. Please include a link to details of event/program or attach a letter to highlight the request.

How many people do you expect at this event or how many people will utilize the program you are requiring this Product Donation for?

What date will the Product Donation be required by?

If the Product Donation is to support an event that your organization is hosting how will the product donation be used at the event? For example raffle, SWAG Bags etc.

If the Product Donation is to support the charity/nonprofit for a specific program that your organization offers how will the Product Donation be used?

**Statement of Need:** Describe the challenge/situation the charity/nonprofit will be addressing by this event or program. Who is affected? In what ways are they affected and to what extent? Why is the problem significant?

**Expected Results:** Clearly identify the results the charity/nonprofit hopes the product donation will achieve and that the event/program will also achieve. What do you expect to result from the event/project your organization will run?

**Recognition and Visibility:** Explain how SC Johnson will receive recognition and visibility as an organization supporting this initiative or project?

*Please submit your completed Product Donation Request form to the following e-mail address: CAenrich@scj.com*

*Please note. Due to the high volume of requests we receive, only those requests which are successful will be contacted. Our goal is to process requests within 12 – 14 weeks.*

*If your organization is approved for a Product Donation the charitable organization is responsible for picking up the Product Donation at 1 Webster St., Brantford, ON N3T 5R1. Arrangements will be made for scheduled pick up once approved.*