



# GRANT APPLICATION

Email completed application to [Grants@VisaliaRotaryClub.com](mailto:Grants@VisaliaRotaryClub.com)

The Downtown Rotary Foundation Board meets the third Tuesday of every month. In order to be considered at that time Grant Applications must be received two weeks before the monthly meeting date. If you have questions or concerns please email us for clarification.

The Downtown Rotary Foundation requires a written report on the outcome/success of the event. This report is required before any subsequent grant requests will be considered. (Include photos of our logo use)

The Downtown Rotary Foundation requires appropriate recognition of grants and the use of our Downtown Rotary Foundation logo displayed in an appropriate way as well as included in media releases, social media, and items of print.

Name of Organization	Amount Requested
Organization Address	Date Requested by
City/State/Zip	Today's Date
Phone	Individual Requesting
Email	Title
<input type="checkbox"/> 501c(3) <input type="checkbox"/> 501c(4)	Phone
<input type="checkbox"/> Other                      Tax Number	Email

Rotarians involved in this project?

Do you need our logo artwork?

Are there any other recognition opportunities for this request?  
(complementary tickets, table sponsorship, social media, etc.)

Would you be willing to give a presentation at our Club meeting?

**Incomplete or inaccurate information may delay or void your application**

I certify that the information provided in this request is complete and accurate:

Signature

Rotary Board Approval Amount

Date

Signature

## ATTACHMENTS REQUESTED

(Do not return this page)

Current Board of Directors or governing body (if applicable)

Grant Request Information. Please include the following information

### FOR A PROJECT / EVENT REQUEST

Organizational Mission

Brief description of services

Name of project/event and description (New or ongoing)

Project Budget

Goal of Project

Number of persons served

Impact on organization (annual fundraiser, community event, staff training, etc.)

### FOR GENERAL OPERATING SUPPORT

Organizational Mission

Brief description of services

Annual operating budget

Number of persons served/ target population

How success for this project will be measured

### FOR AN INDIVIDUAL REQUEST

Purpose of request

Total budget

Expected Outcome

(i.e. special training, conference scholarship, education, etc.)