



The Rotary Foundation – Rotary District 6060 Community Assistance Program Application

Please print or type all information.

1. D6060 Rotary Club of

DISTRICT

CLUB NAME

2. Describe the project, its location, and its objectives.

ESTIMATED START DATE OF PROJECT

ESTIMATED COMPLETION DATE

3. Describe how the project will benefit the community and/or improve the lives of the less fortunate.

4. Describe non-financial participation by Rotarians in the project (i.e., Rotarian activities).

5. Project Contacts — Two Rotarians must be listed who will provide oversight and management of the project funds.

PRIMARY CONTACT NAME

ROTARY POSITION / TITLE

ADDRESS

TELEPHONE

FAX

EMAIL

SECONDARY CONTACT NAME

ROTARY POSITION / TITLE

ADDRESS

TELEPHONE

FAX

EMAIL

6. How will the general public know this is a Rotary-sponsored project? Please provide details, e.g., publicity in a newspaper or display of a plaque with the Rotary wheel and club name.

7. Cooperating Organizations — If the project involves a cooperating organization, please provide the name of the organization below and attach a letter of participation from that organization that specifically states its responsibilities and how Rotarians will interact with the organization in the project. *By signing this application, the Rotarian sponsors endorse the organization as reputable, responsible, registered with the project country, and acting within the laws of the project country.*

NAME OF COOPERATING ORGANIZATION

8. Budget — Please include a complete, detailed, and itemized budget for the entire project. Supporting documentation utilized for the development of this budget may be requested. Include pro-forma invoices for equipment that will be purchased through this grant.

Total US\$ _____

9. Authorization — All Rotary clubs/districts involved in this project are responsible to The Rotary Foundation for the conduct of the project and for reporting on it. *The signatures on the application confirm that the sponsors understand and accept the responsibility. The signatures of the sponsors also affirm that all information in this application is true and accurate, to the best of their knowledge.*

Club President-Elect — As President-Elect of the Rotary Club of _____
I hereby affirm that the club has voted to undertake this project as an activity of the club.

NAME (PLEASE PRINT)

SIGNATURE

DATE

10. District Governor Approval — As governor of District 6060, I hereby affirm the use of US\$ _____ from my district's District Simplified Grant Program Funds for this project.

Margie Sammons: 2021-2022

NAME

SIGNATURE

DATE

CAP Grant Checklist

_____ The First Contact on this grant is the grant writer, who attended the Club Qualification Training and has signed the Club's Memorandum of Understanding.

_____ This project is a new effort for our club, or we have done it _____ times in the past (maximum number of times a project can be done is three).

_____ This organization has benefitted from a CAP grant project _____ times in the past (maximum of 3).

_____ Our club's 2020-21 CAP grant project has been completely recorded in Rotary Club Central.

_____ This project is totally or at least primarily sponsored by the Rotary Club—we are not simply funding the project of another organization. No funds will be paid directly to another charitable organization.

_____ No funds will be utilized to support travel expenses, salaries, administrative or other overhead costs, or the operational costs of another organization.

_____ Work on the project will not begin until the matching grant is received from the District.

_____ The project will be completed in entirety by the deadline of January 31, 2022.

_____ The sponsor club agrees to adhere to all stewardship requirements set forth for Future Vision Pilot District Clubs in the Memorandum of Understanding.

_____ The sponsor club will publicly identify the project as Rotary sponsored.

_____ The project addresses the following Area of Focus or special community need: _____

_____ No funds from this grant will be used to directly benefit a Rotarian or any Rotary employee, including those employed by a club, district, Rotary International, or any other Rotary entity.

_____ No funds from this grant will be used to directly benefit a relative, including spouses and children-in-law, of any Rotarian or Rotary employee as defined above.

**Mail completed applications to:
Stephanie Gremminger
17225 Pleasantview Drive
Ste. Genevieve, MO 63670**

Or email: gyroflyng@hotmail.com

Deadline for 2021-2022 Rotary year is June 15, 2021.