**ROTARY FOUNDATION OF DUVALL**

A 501(c)(3) non-profit organization

P O Box 1962, Duvall, WA 98019

2018 Grant Application

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| **GENERAL INFORMATION** | | | | | | | | | |
| **Name of Organization** | |  | | | | **Funding Amount Requested** | | |  |
| **Street Address** | |  | | | | | |  | |
| **City** |  | | | | | | **State Zip Code** |  | |
| **Phone** |  | | | | | | **E-mail Address** |  | |
|  | | | | | | | | | |
| **Mission of Org**: | | | | | | | | | |
| **ABOUT THE PROJECT** | | | | | | | | | |
| **Name of Project:** | | |  | | | | | | |
| **Please Mark which of Rotary’s area(s) Focus are addressed by this project** | | | | | | | | | |
| **Peace and conflict prevention/resolution** | | | |  |  | | | | |
| **Disease prevention and treatment** | | | |  |  | | | | |
| **Water and sanitation** | | | |  |  | | | | |
| **Maternal and child health** | | | |  |  | | | | |
| **Basic education and literacy** | | | |  |  | | | | |
| **Economic and community development** | | | |  |  | | | | |
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| Statement of Need (**why**): | | | | | | | | | |
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| Project Goal(s): | | | | | | | | | |
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| **Project Description (please include where this project will take place, when this project will occur, who will benefit, and how will they benefit from the project)** | | | | |
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| **How will the success of this project be measured?** | | | | |
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| **What are the expected long-term community impacts of this project?** | | | | |
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| **Itemized Project Budget (Please list revenue and expenses)** | | | | |
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| **Rotary Club of Duvall Member Sponsor Name** | |  | | |
|  | | | | |
| **FOR CLUB AND FOUNDATION USE BELOW** | | | | |
| Approved/Denied by Club Grant Review Committee | | | | |
| Approved |  | | Denied |  |
| Name |  | | Date |  |
| Approved/Denied by Rotary Club of Duvall | | | | |
| Approved |  | | **Denied** |  |
| **Name** |  | | **Date** |  |
| **Grant Review Committee Rationale for approval/denial** | | | | |
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