

DONATION REQUEST APPLICATION INSTRUCTIONS

Introduction

The West Plains Rotary Noon Club is dedicated to serving our community. All Donation Request Applications will be considered based on how the charitable donations will benefit the communities served by our Rotary Club. Please review the following information to ensure that your application is completed properly.

Procedural Steps

1. A Donation Request Application and a Project/Event Summary shall be completed and submitted by a person within the requesting organization/group authorized and responsible for the donation request;
2. Completed Donation Request Applications must be submitted, in writing, to the West Plains Rotary Noon Club by mail to PO Box 394, West Plains, MO 65775 or email to info@WestPlainsRotary.org.
3. All completed Donation Request Applications will be submitted to the West Plains Rotary Noon Club, Board of Directors, for review and consideration on a monthly basis; exceptions made for Emergency Donation Requests;
4. The Board of Directors will review, discuss, and vote on whether or not to approve the donation request.
5. If approved, an award letter and charitable donation check will be sent to the organization/group who requested the donation.
6. Within (1) one year, of charitable donation approval, the organization/group shall submit a letter to the West Plains Rotary Noon Club, summarizing of how the funds were used within the communities served by the West Plains Rotary Noon Club.

Donation Awarding Criteria

1. All Donation Request Applications over \$500 must be sponsored/supported by a member of the West Plains Rotary Noon Club;
2. Charitable donations must be used for projects/events that benefit the communities served by the West Plains Rotary Noon Club, with some exceptions;
3. Charitable donations must only be used for the project/events defined in the Donation Request Application and Project/Event Summary.
4. All Donation Request Applications must be in line with the principals and values of Rotary International and The West Plains Rotary Noon Club.
5. Donation Request Applications will not be considered for political organizations/events, national parent organizations, for-profit companies or individuals, with some exceptions.
6. All Donation Request Applications will be considered based on the needs of the organization/group and/or how the charitable donation will benefit the communities served by the West Plains Rotary Noon Club.
7. The West Plains Rotary Noon Club reserves the right to refuse or deny any Donation Request Application.

Project/Event Summary:

1. Date of project/event;
2. Duration of project/event;
3. The specific purpose of the request;
4. Communities to be served by project/event;
5. Number of people to be served by project/event;
6. Total cost for project/event;
7. How charitable donation will be used for project/event;
8. Other funding sources for project/event;
9. Has the organization/group received funding from the West Plains Rotary Noon Club in the past; for this project/event; for other projects/events;
10. Will this project/event help advance the goals of the West Plains Rotary Noon Club in providing assistance to our local community?
11. Background of the organization/group's contributions to the community.

DONATION REQUEST APPLICATION INSTRUCTIONS

Please select one:

- General Donation Request
 Emergency Donation Request

Requesting Group/Organization: _____		
Group/Organization Website: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Contact Person: _____	Title/Position: _____	
Contact Phone: _____	Contact Email: _____	
Is the Organization/Group a tax exempt 501(c)3 non-profit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If approved, make check payable to: _____		

Project/Event: _____

Project/Event Date: _____

Project/Event Location: _____

Area(s) Served by Project: _____

Number of People Served by Project: _____

Amount Requested: \$ _____ Total Project/Event Cost: \$ _____

Project Event Summary: (Limit to 500 characters) West Plains Rotarian Sponsor: _____

By signing below, I (we) affirm that the information being provided is true and accurate to the best of my (our) knowledge and is in compliance with my (our) organization's policies.

_____ _____
 Group/Origination Representative Date

Would your group/organization be interested in volunteering at a Rotary Club event? Yes No

FOR ROTARY USE ONLY	
Date Request Received: _____	Received by: _____
Date scheduled for review by Board of Directors: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Amount Awarded: \$ _____	Date: _____
Date Mailed: _____	Picked-up by: _____ Date: _____