Rotary Club of Broken Arrow, OK



Donation Request Criteria Dec 1 - Feb 28 SERVICE Above Self

The Rotary Club of Broken Arrow is committed to positively impacting the communities it serves by providing assistance to local non-profit organizations and charities. We are happy to consider supplementing your organization's fundraising endeavors through monetary donations and service.

In an effort to fulfill as many requests as possible, the Rotary Club of Broken Arrow will only honor one request per organization in a year's time (July through June). Since the Rotary Club of Broken Arrow receives a large volume of requests, please be aware that we attempt to fulfill as many requests as possible and cannot guarantee that every donation request will be met. No money will be given to any charitable organization for educational scholarships.

To receive a charitable contribution from the Rotary Club of Broken Arrow, the applicant must meet <u>all</u> the following criteria:

- Local the funds must be used locally; AND
- Charitable must be an organization, not an individual, that is clearly philanthropic in nature; AND
- Special Function/Program the Rotary Club of Broken Arrow must see a specific end result or program/project (no general operations, salaries, administrative and maintenance costs); AND
- Broad Based Impact the contribution must reach a large segment of the Broken Arrow community; AND
- High Visibility for Broken Arrow Rotary if possible and appropriate, the applicant that receives a contribution must agree to publicize the Rotary Club of Broken Arrow name or symbol as part of the program, activity, etc.
- Preference is given to organizations that impact children's health as well as the opportunity for Rotarian involvement. Rotary is built on service and as a club we strive to be present in the community where we invest and not just serve as a check writer.

Please allow a minimum of four weeks to process your donation request. During holidays and other busy seasons, it could take up to six weeks for processing. Due to the high volume of requests received, Broken Arrow Rotary asks that telephone or email inquiries regarding the status of your request not be made. All donation decisions made by Rotary will be communicated after the board's decision at the March board meeting (Second Monday of March).

- Declined Requests: The requesting organization will receive notification via mail indicating the request has been declined and the reason for the decision.
- Approved Requests: The approved donation will receive notification via mail and be awarded to the organization's representative at one of our regularly scheduled Monday meetings in April.

All applications are to be mailed to: Rotary Club of Broken Arrow PO Box 893 Broken Arrow, OK 74013

Rotary Club of Broken Arrow, OK



Application for Charitable Donations (Application is open from Dec. 1-Feb. 28th)

1.	Organization:				
	Address:	Contact Rhon	0:		
	Contact Name and Title: Contact Phone: Contact E-Mail:				
	Is your organization a 501(c)(3) non-profit? Check one:	YES	NO		
2.	Amount requested from the Rotary Club of Broken Arrow:	\$			
3.	Brief description of <i>specific purpose</i> for which funds are requested.				
4.	How will funds be utilized locally?				
5.	What will be the broad-based impacts of these funds?				
6.	5. How will your organization publicize the Rotary name or symbol as part of your program/activity?				
	Does your program invest in children's health? Check one becifically how this impacts children.		If yes, please identify		
8.	Will Rotarians be involved in your project or program? Che	ck one YES	NO If yes, how?		

9. Have you requested or will you be requesting funds from another organization(s) for this same purpose? Check one YES NO If yes, please identify the other organization(s) and the amounts requested.

10. Have you received funds from Broken Arrow Rotary in the past? Check one YES NO If yes, you must have completed and submitted the Compliance Report Form for the previous funds to be eligible to receive a grant for the current year.

I/we agree to use the funds as stated in this application.

Signature of Applicant

Date

Accepted by Rotary Member (Print Name)

Date

Rotary Club of Broken Arrow, OK

Compliance Report Form

SERVICE Above Self

To be completed at year end of grant. This form will be mailed out from the club for your completion.

If an Organization receives a grant, this Compliance Report <u>must be completed</u> and received by the Rotary Club of Broken Arrow no more than one month after the event or purchase has occurred. Organizations not submitting a completed form will <u>NOT</u> be eligible to receive a grant in the future. This completed form can be mailed to: Rotary Club of Broken Arrow, PO Box 893, Broken Arrow, OK, 74013

Organization:		
Name of Project:		
Amount of Grant:	Date Received:	
1. Purpose for requested funds:		
 Have you expended all of the grant funds? Check one: If not, how much is remaining and when will it be spent?	YES	NO
in hot, now much is remaining and when will it be spent?		

3. Attach copies of receipts and/or photos of equipment and/or, if an event, proof that it took place.

On behalf of the Organization listed above, with my signature below I hereby affirm the statements and representations are true to the best of my belief.

Signature of Applicant