## **Grant Application**



Please note that the Grant Application is a two-page document, with additional documentation necessary as outlined on page 2. A fully completed application is necessary for consideration of the grant request. Please note any extenuating circumstances that may preclude submission of a complete application.

Name of Applicant:									
Address:									
Contact Person:									
Phone:			Email:						
Amount Requested:			Payable	to:					
Population Served by Project:		Northvill	Northville Community			SE Michigan	Othe	Other:	
Purpose/Use of Grant Funds:		Fighting	Fighting Disease		Supporting Education			Food/Security	
Supporting Families & Children		Commur	Community Support		Protecting Environment			Clean Water	
Other:	i					I			
Beginning/Ending Date	e of Project	::							
Explain the need for and importance of the project:									
Objective and plan of p	project:								
Applicant qualification	s and succ	ess in deliv	ering pro	iect r	need:				
			<b>6</b>	,					

## **Grant Application**



List other funding sources th	at have been applied for a	and/or are committed to the project:			
Should the grant applicant/o who will take possession of	-	, or should the activity/project terminate, ith grant funds?			
How did you learn about the	Rotary Foundation?				
I hereby certify that I am an	authorized representative	e of the applicant.			
Signature		Date			
Print Name		Title			
ADDITIONAL	. INFORMATION NEEDED V	WITH THE APPLICATION FORM			
co. Overall budget for the process and the percent going. IRS Letter or Tax ID Number. IRS 990 Form for most rece. Charity Navigator Rating (if Names and addresses of our Northville Rotary Foundation Please email a copy of your gran	t flyers, or other printed priject/activity, including the ig to the intended beneficial or confirming 501(c)(3) tax ent year filed (if applicable) f applicable) rganization board of direct in Board of Directors generally trequest and any attachment.	roject materials (if applicable) percent of funding allocated for administrative aries. status (if applicable) e) tors (if applicable) by meets on the second Tuesday of each month. ats to Foundation.NorthvilleRotary@gmail.com at			
east two weeks prior to the Fou					
For Founda	tion Board Use Only – Do I	Not Complete Below This Line			
Board Review Dates:					
Board Action:	Amount: _	Date:			
Board Comments:					
Grant #FY -					

Page **2** of **2**