

Marion Rotary Club/Foundation

P.O. Box 1091

Marion, Ohio 43301-1091

Annual Community Grant Application

The undersigned hereby makes a request for funding from the Marion Rotary Club/Marion Rotary Foundation, Inc.

1. Legal name of the organization:

2. Description of the organization's purpose:

3. Does the organization have tax-exempt status under the Internal Revenue Code 501(c)3, 501(c)4, or educational organization?

Yes_____ No_____

4. If yes, attach evidence of tax-exempt status.

5. Name, address, and telephone number of responsible organization representative to contact:

6. Name of a current member of the Marion Rotary Club that would serve as a reference for your grant request:

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7. Specific amount requested: \$ _____

8. Outline, as briefly as possible: the proposal to be accomplished, including: services to be rendered or items to be purchased, a time period of the proposal, a summary of how the proposal or items purchased will benefit the Marion community, how the involvement of the Marion Rotary Club will be publicized, plans for continued funding in subsequent years if necessary, plans for determining the effectiveness of the proposal, a budget to include other funding sources, and any other pertinent information, such as implementation, etc. Also, please reference consideration for the Grant Funding Priorities for the Marion Rotary Foundation.

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9. Attach a copy of the most recent budget for your organization, along with a projected budget for the year in which this funding, as requested, would be utilized.

Please use additional paper/pages for your responses as needed, following the instructions from the cover letter.

Signature_____

Printed Name_____

Title_____

Date_____