



## ***Meridian Rotary Club #3961***

### ***District 6820***

## **Community Grant Application**

### **INSTRUCTIONS:**

1. Please type or print legibly.
2. Answer each question within the space provided, if possible, but use additional pages, if necessary. Attaching excessive information is discouraged and may not improve your application.
3. Sign and date the application.
4. Mail or email completed copy to:  
**Rotary Club of Meridian**  
**PO Box 3413**  
**Meridian, MS 39303**
5. Applicants must submit a current IRS Form W-9 and a copy of their IRS Determination Letter with their application and be tax-exempt under Section 501(c)(3) of the Internal Revenue Code, classified as "not a private foundation." Governmental agencies and public charities may apply. Payment of grants awarded to teachers, schools or school districts will be sent to the school or district office with the teacher(s)'s names in the memo line of the check. Grants awarded to community-based 501(c)(3) organizations will be paid directly to the qualifying organization.
6. Deadline: There is no deadline for applications. The Meridian Rotary Club accepts applications year-round. Applications are reviewed quarterly.
7. This is our general grant form which can be used for a wide variety of special programs or projects. Questions? Contact the chairman of the Meridian Rotary Foundation Committee: Carra Purvis - carrapurvis@gmail.com



**Name of Organization, School, or Government Entity:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Contact Person:**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please tell us your preferred method of communication: email \_\_\_ phone \_\_\_ mail \_\_\_**

**Mission Statement:**



**PROJECT OR PROGRAM INFORMATION:**

**Project or Program Focus (please check at least one):**

Art: \_\_\_\_\_

Education: \_\_\_\_\_

Community/Economic Development: \_\_\_\_\_

Health, Welfare or Social Services: \_\_\_\_\_

Historic Preservation: \_\_\_\_\_

Youth & Children: \_\_\_\_\_

Other: (please describe using a word or phrase) \_\_\_\_\_

**Amount of Grant Requested: \$\_\_\_\_\_**

A. Title of Project or Program: \_\_\_\_\_

B. Number of People Served by Project or Program: \_\_\_\_\_

C. Time Frame of Project or Program: \_\_\_\_\_

\_\_\_\_\_

D. Description (Summarize your project or program and provide data that shows the need for it.)



E. Goals and Objectives (What is the final goal and what basic steps must be taken to reach it?)

F. Are you collaborating with any other groups or agencies for this project?  
Yes \_\_\_\_\_ or No \_\_\_\_\_. If so, please explain:

**PROJECT BUDGET:**

List items separately with approximate cost of each.

Materials, Equipment, Supplies, etc.


Total: \_\_\_\_\_



Application Contact's Signature: \_\_\_\_\_

Applicant's Name Printed: \_\_\_\_\_

Date: \_\_\_\_\_

Did you remember to ...

- Attach your Form W-9?
- Attach a copy of your IRS
- Tax Determination Letter (RE: 501(c)(3) verification?)
- Include supporting, but not excessive, information and/or data you believe is pertinent to this application?
- Keep a copy for yourself?
- Keep the first page as a reference for contacts, dates, & grant information?