

District 7450

District Grant Application

*Please print or type all information and use additional sheets of paper if necessary. **Incomplete applications will not be considered.***

1. PROJECT DESCRIPTION

Please describe the project, its location, its objectives, and how they will be attained. **Note: *The Project cannot be started until the District Grant Application is approved by the District Grants Subcommittee.***

Estimated start date of project _____ Estimated completion date of project _____

2. OTHER NON-ROTARY ORGANIZATIONS

If this project involves a cooperating organization, provide the name of the organization below attaching a letter of participation from that organization that specifically states its responsibilities and how Rotarians will interact with the organization in the project. ***By signing this application, the Rotarian sponsors endorse the organization as reputable, responsible, registered with the project country, and acting within the laws of the project country.***

☐ Letter of participation from organization attached

3. ROTARY CLUB DISTRICT 7450 MAKING THE APPLICATION

Name the club that will coordinate principle funding for the project and that will assume responsibility for the project.

Club _____

Project Contacts: Three Rotarians must be listed who will provide oversight and management of the project funds for the entire duration of the project, even if it continues into another Rotary year.

Primary Contact #1:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____

[Home](#)

Office

Fax _____

Signature _____

Additional Contact #2:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____

[Home](#)

Office

Fax _____

Signature _____

Additional Contact #3:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____

[Home](#)

Office

Fax _____

Signature _____

4. INTERNATIONAL ROTARY CLUB PARTICIPATING IN DISTRICT GRANT

Name the club that will coordinate principle funding for the project and that will assume responsibility for the project.

Club _____

Project Contacts: Three Rotarians must be listed who will provide oversight and management of the project funds for the entire duration of the project, even if it continues into another Rotary year.

Primary Contact #1:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____
Home _____

Office

Fax

Additional Contact #2:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____
Home _____

Office

Fax

Additional Contact #3:

Name _____ Rotary Position/title _____

Email _____ Address _____

Telephone _____
Home _____

Office

Fax

5. AREAS OF FOCUS (Check all that apply):

Peace & Conflict Prevention/Resolution

Water and Sanitation

Basic Education and Literacy

Disease Prevention and Treatment

Maternal and Child Health

Economic & Community Development

6. PROJECT BUDGET

Include a complete itemized budget for the entire project. Please use separate pages if necessary. ***Price quotes from the supplier and/or other cost documentation must be attached for each item valued at a total cumulative cost of US\$1,000 or more.***

☐ Supplier estimates attached

TOTAL _____

7. PURCHASE OF EQUIPMENT, MATERIALS, OR SUPPLIES

1. Who will own equipment, materials, or supplies? (cannot be owned by a Rotary club or Rotarian)
2. Who will be responsible for maintenance, operating, and/or storage costs of the equipment/supplies?
3. If equipment/supplies will be shipped (in the event of this being an international project), have arrangements been made for customs clearance?

8. PROPOSED FINANCING

Please list all financing and indicate cash and Simplified Grant money being requested.

Primary Sponsor Rotary Club

Amount Contributing

Other Rotary Clubs/Districts

Additional funding from other sources (if any)

SUBTOTAL:

Amount requested from District Grant (not to exceed amount contributed by Rotary club/s)

TOTAL: _____

9. PUBLICITY

How will the general public know that this is a Rotary-sponsored project? Please provide details, e.g. publicity in a newspaper or display of the Rotary wheel.

10. REPORT

The sponsoring club is required to complete and submit progress and final reports to the District Grant Subcommittee. Please indicate below the individual who will take primary responsibility for submitting these reports.

Name _____ Signature _____

Name of Club _____ No. _____

11. ACTIVE ROTARIAN PARTICIPATION AND AUTHORIZATION

SPONSORSHIP AUTHORIZATION

All Rotary clubs and Districts involved in this project are responsible to The District 7450 Rotary Foundation Grants Subcommittee (DGSC) and ultimately to The Rotary Foundation for the conduct of the project and for reporting on it. The signature at the bottom of this page confirms that the sponsors understand and accept responsibility for the project. Sponsors may either sign this page or submit a separate letter of commitment.

Please list below the activities your club will undertake demonstrating the active involvement of Rotarians in this project.

By signing below, we agree to the following:

- All information contained in this application is true and accurate, to the best of our knowledge.
- This application meets all District Grant criteria as stated in District Grants (DG) '*CRITERIA AND GUIDELINES*'.
- The club has agreed to undertake this project as an activity of the club.
- We understand and will comply with the required Rotarian activities and reporting requirements as stated in District Grants (DG) '*CRITERIA AND GUIDELINES*'.
- We agree that, should the project take more than six months to complete, *interim reports* will be submitted every six months from the time the grant is paid, and *final reports* will be provided *no later than* two months after the completion of the project.

Club president (print name) _____ Signature _____

Club _____ Date _____

12. AUTHORIZATION OF CLUB'S FUNDS

Complete below authorization for club funds to be used for this project. Presidents of all clubs contributing must sign this authorization. (Duplicates of this sheet maybe made.)

Club President (print name) _____ Signature _____

Club _____ Date _____ Amount authorized _____

13. COMPLETION CHECKLIST

Before submitting your District Grant (DG) application, please take a minute to review the checklist and make sure that it is complete. If you have any questions or concerns, please contact the District Grants Subcommittee Chairman.

- ☐ Does the project meet all District Grant criteria?
- ☐ Has the sponsoring club appointed three contacts to oversee the project? Are these individuals correctly listed on the application?
- ☐ Is there written funding confirmation from the club president/s who will be in office during the year of the funding request?
- ☐ Have the responsibilities of the project sponsor been outlined? Do they meet the requirements of a DG project?
- ☐ Is there a written commitment (or signature on Section 9 of the application) from the project sponsor?
- ☐ Is there a detailed budget provided for the project?
- ☐ Is there a cost estimate from the supplier for each item valued at a cumulative cost of US\$1,000 or more?
- ☐ Is a cooperating organization involved? If so, is there a letter from the organization, which specifically states how the organization will work together and how Rotarians will be involved and interact?
- ☐ Have you outlined in detail how you plan to publicize the project?
- ☐ Have you made copies of all documents for your files prior to submitting them to the District Grants Subcommittee?

Note: The District Grant Subcommittee will review the applications at their scheduled meetings. Send the complete application and all attachments to

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