

# District 7450

# District Grant Application

Rotary Year: 2019-2020

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

## 1. PROJECT DESCRIPTION

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

Estimated start date of project \_\_\_\_\_ Estimated completion date of project \_\_\_\_\_

## 2. 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. **Complete this section for all domestic and international projects.**

Club \_\_\_\_\_

Put *club name* and *project title* at the top of page 2.

**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 \_\_\_\_\_

Address \_\_\_\_\_

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Rotary Club Name:

Project Title:

Signature \_\_\_\_\_

**Additional Contact #2:**

Name \_\_\_\_\_ Rotary Position/Title \_\_\_\_\_

Address \_\_\_\_\_

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Signature \_\_\_\_\_

**Additional Contact #3:**

Name \_\_\_\_\_ Rotary Position/Title \_\_\_\_\_

Address \_\_\_\_\_

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Signature \_\_\_\_\_

**3. COOPERATING NON-ROTARY ORGANIZATIONS**

If this project involves cooperating organization(s), provide the name of each organization below and attach a letter of participation from each organization which 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.*

The name(s) of the cooperating non-Rotary organization is(are)

Rotary Club Name:

Project Title:

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Letter(s) of participation from organization(s) attached

**4. FOR INTERNATIONAL ROTARY PROJECTS ONLY:**

*Complete this section only for international projects.* If this project involves the collaboration of an international partner club, indicate which club that is, who the contacts are, and what that club's role will be.

Club \_\_\_\_\_

Role \_\_\_\_\_

**Project Contacts:** Please name three contacts for the project from the international partner club.

**Primary Contact #1:**

Name \_\_\_\_\_ Rotary Position/Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Signature \_\_\_\_\_

**Additional Contact #2:**

Name \_\_\_\_\_ Rotary Position/Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Rotary Club Name:

Project Title:

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Signature \_\_\_\_\_

**Additional Contact #3:**

Name \_\_\_\_\_ Rotary Position/Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone-Home: \_\_\_\_\_ Office \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Signature \_\_\_\_\_

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

- |   |   |
|---|---|
| <input type="checkbox"/> Peace & Conflict Prevention/Resolution | <input type="checkbox"/> Disease Prevention and Treatment |
| <input type="checkbox"/> Water and Sanitation                   | <input type="checkbox"/> Maternal and Child Health        |
| <input type="checkbox"/> Basic Education and Literacy           | <input type="checkbox"/> Economic & Community Development |

**6. PROJECT COSTS**

Attach a complete itemized budget for the entire project. *Price quotes from the suppliers and/or other cost documentation must be attached for each item valued at a total cumulative cost of US\$1,000 or more.*

Rotary Club Name:

Project Title:

Supplier estimates attached

**TOTAL** \_\_\_\_\_

**7. PURCHASE OF EQUIPMENT, MATERIALS OR SUPPLIES**

1. Who will own equipment, materials, or supplies? (Cannot be 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 internationally, what arrangements been made for customs clearance?

\_\_\_\_\_

**8. PROPOSED FINANCING**

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

**Primary Sponsor Rotary Club**

**Amount Contributing**

\_\_\_\_\_

\_\_\_\_\_

**Other Rotary Clubs / Districts**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Funding from other sources**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBTOTAL:** \_\_\_\_\_

**District 7450 Grant requested** (not to exceed the amount contributed by District 7450 Rotary Clubs)

\_\_\_\_\_

**PROJECT 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.

Rotary Club Name:

Project Title:

**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 \_\_\_\_\_ Club No. \_\_\_\_\_

**11. ACTIVE ROTARIAN PARTICIPATION**

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

**12. PRIMARY SPONSORSHIP AUTHORIZATION.**

All Rotary clubs and Districts involved in this project are responsible to The District 7450 Rotary Foundation District 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. Cooperating sponsors may either sign this page or submit a separate letter of commitment.

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 ***“Terms and Conditions for Rotary Foundation District Grants and Global Grants”***.
- 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 ***“Terms and Conditions for Rotary Foundation District Grants and Global Grants”***.
- 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 President-Elect (print name) \_\_\_\_\_ Signature \_\_\_\_\_

Club \_\_\_\_\_ Date \_\_\_\_\_

**13. AUTHORIZATION OF COOPERATING CLUB’S FUNDS**

Rotary Club Name:

Project Title:

Complete below authorization (“Letter of Commitment”) for club funds to be used for this project. Presidents of all clubs contributing must sign this authorization. (Duplicates of this section maybe made or downloaded.)

Club President (print name) \_\_\_\_\_ Signature \_\_\_\_\_

Club President-Elect (print name) \_\_\_\_\_ Signature \_\_\_\_\_

Club \_\_\_\_\_ Date \_\_\_\_\_ Amount authorized \_\_\_\_\_

#### **14. COMPLETION CHECKLIST**

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

- Have you submitted a Memorandum of Understanding for the year of your project?
- Has your club adopted Club Financial Management Plan?
- 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?
- Is more than one Rotary club involved? If so, is there a Letter of Commitment from every cooperating Rotary club?
- 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 11 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?
- Have all the blanks been filled? Are all the signatures present?

Rotary Club Name:

Project Title:

***Note: The District Grant Subcommittee will review the applications at their scheduled meetings.  
The deadline for submitting applications for the Rotary Year 2018-2019 is May 15, 2018.  
Send the complete application and all attachments to***

**Martha Bowman, Chair**  
District Grants Subcommittee  
1025 Napfle Avenue  
Philadelphia, PA 19111  
mbebowman@aol.com  
215-280-4749  
FAX: 215-663-0203

*Be sure to put Rotary District Grant in the subject line of your email, on the envelope, or on any Cover sheet.*