



Rotary Club of Beloit
July 1, 2021- April 1, 2022

SIGNATURE GRANT APPLICATION

CRITERIA:

1. A time frame of more than 12 months to completion
2. A funding need of more than \$2,000.00
3. IN ORDER TO BE SUBMITTED FOR CONSIDERATION, SIGNITURE PROJECTS REQUIRE KNOWLEDGE OF THE PROJECT, THE ENDORSEMENT, AND THE WRITTEN SIGNATURE OF A CURRENT MEMBER OF THE ROTARY CLUB OF БЕЛОIT ON THIS APPLICATION.
4. Signature of Beloit Rotarian: _____ Date: _____

Please type or print all responses.

Organization Name: _____

Organization Address: _____

Primary Contact Person: _____

Contact Mailing Address: _____

Contact Phone & Type: _____ _____ _____
Work Cell Home

Project Name: _____

Project Timeline: Start Date _____ Completion Date: _____

Project Focus: Local Regional (or Rotary District) International _____

Amount Requested: _____ Project Funds Needed: _____

“Service Above Self” is Rotary’s international motto. Rotarians identify, support, and implement service projects that improve the quality of life in their own communities, as well as in communities around the world. Rotary has seven (7) primary service project Focus Areas:

- Peace and Conflict Prevention/Resolution
- Disease Prevention and Treatment
- Water and Sanitation
- Protect the Environment
- Basic Education and Literacy
- Maternal and Child Health
- Economic and Community Development

Which Rotary Focus Area best represents your project? _____

PROJECT DETAILS

- 1. Please state your organization’s mission.

- 2. Please identify the target population(s) you serve and state your current client numbers for each segment.

- 3. Please provide a brief general summary/overview of your project. (150 words maximum)

- 4. Provide a brief description of how your organization determined the issue/challenge that created your need for Rotary funds? (150 words maximum)

- 5. How will the project and the amount you are requesting address the need(s) you have identified?
(300 words maximum)

- 6. Specifically, how do you intend to use Rotary grant funds to support your project? (150 words maximum)

7. Please provide your Project Budget.

Current and/or Projected **Expenses**

Current and/or **Projected Revenue Sources:**

Total: _____

Total: _____

8. Have you received other grant or organizational funds for this project?

Yes Total Amount to Date: _____

No

9. Have you applied / or will you apply for other grant and/or organizational funding for this project?

Yes No

If yes, please list them.

10. **Not including your project funding sources**, please describe the other community involvement in your project. Examples: partnerships with other agencies, volunteer groups, etc. (150 words maximum)

11. Why does your organization believe that Beloit's Rotary Club should be involved in this project?
(150 words maximum)

12. Is your Board of Directors aware of this funding application? Yes No

13. Additionally, Rotarians work on the 7 Focus Areas in their own communities through Rotary's four Avenues of Service:: **Vocational Service, Community Service, International Service, and Club Service**. Please identify the Avenue of Service you believe best represents your project.

14. How will your project meet or satisfy a real and present humanitarian need?
(150 words maximum)

15. Identify three (3) ways in which Beloit Rotarians would be able to personally serve as volunteers with this project.

a. _____

b. _____

c. _____

16. Describe the data indicators you will use to demonstrate how the success of your project will be measured and determined. (150 words maximum)

17. It is a significant commitment for the Rotary Club of Beloit to fund a Long-Term Grant (Signature Project). Describe the promotional plans for your project, and state when and how the Rotary Club of Beloit will be recognized for its participation. (150 words maximum)

OFFICER SIGNATURE SECTION – REQUIRED FOR ALL APPLICATIONS

NOTE: This application may be signed either by hand in person, or via DocuSign,

By signing below, (organization name) _____ accepts responsibility for:

A. Completing a final written report of the project within 30 days of project completion.

B. Submitting a copy of the final project report to the Grants Committee, Rotary Club of Beloit, P.O. Box 321, Beloit, WI 53512-0321 **within 30 days of project's completion.**

C. Further, the organization acknowledges that the Rotary Club of Beloit reserves the right to suggest and allow for special conditions in the acceptance of the application.

Print Name of Organization's Officer: _____

Officer Signature: _____

Title: _____ Date: _____

THIS SECTION TO BE COMPLETED BY ROTARY CLUB OF BELOIT GRANTS COMMITTEE

Date application received: _____

Date funds needed: _____

All documentation completed: Yes _____ No _____ Pending _____

Missing items _____

Grants Committee Review Date: _____

Result: Approved for Club vote: _____

Date of Club vote: _____

Result of Club vote: _____

Request Denied: _____

Reason: _____