



Grant Request & Application Form

Seaside Rotary Foundation, Seaside OR 97138



| | | | | |
|--------------|--|--------------------------|--------------------------------------|--|
| Date: | | Please check one: | <input type="checkbox"/> New Request | <input type="checkbox"/> Renewal Request |
|--------------|--|--------------------------|--------------------------------------|--|

| | | | | |
|--|----------------------|---------------|-----------------------|-------------------------|
| Organization Name | | | | |
| Address | | | | |
| City | State | Zip code | | |
| Email | Phone # | | | |
| Contact Person Applying for Grant | | | | Prefix (Mr., Ms., etc.) |
| First Name | Last Name | | | |
| Title | E-Mail | | | |
| Address | | | | |
| City | State | Zip code | | |
| Phone # | Sponsoring Rotarian | | | |
| Organization's Primary Purpose | | | | |
| Nonprofit ID / Employment number (EIN) | | | Year org. established | |
| Organization's primary activities / projects | | | | |
| Key Project Goals (Describe 1 –2 measurable goals / outcome. | 1. | | | |
| | 2. | | | |
| Who will benefit directly from this grant activity / project? | | | | |
| Communities served by this grant | | | | |
| City | City | City | | |
| Rotary emphasis served by this grant | | | | |
| Local Community | | International | | |
| Senior Citizens | | Youth | | |
| Projected activity / project Budget | Total project budget | | \$ | Total requested \$ |
| Please list <u>other funding sources</u> for this project (and amounts for each) and indicate if the funding has been secured with "Yes" or "No"). You may include the value of in-kind support. | | | | |
| Source | Amount | \$ | Secured? Y/N | |
| Source | Amount | \$ | Secured? Y/N | |
| Source | Amount | \$ | Secured? Y/N | |

Completed grant applications are reviewed on the 2nd Tuesday of each month for consideration and funding.
Please mail your application to:
 Seaside Rotary Foundation, Inc.
 P.O. Box 634
 Seaside OR 97138



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IF THIS GRANT REQUEST exceeds \$1,500.00, the following information should be provided (if available)

| | | | |
|---|--|---|--|
| Grant Sustainability (Briefly describe how this activity / project will be funded beyond this request) | | | |
| Number of FT Staff | | P/T Staff | |
| Number of board members | | Number of board members who contribute to annual budget | |
| | | No. Volunteers | |
| | | Number of board meetings per year | |
| Organization Financial Information | Organization budget for current year | | Budget / Fiscal Year |
| | Organization expenditure total for last year | | |
| | Organization revenue total for last year | | |
| Revenue breakdown for last year | Memberships | | Month Budget Begins: Month Budget Ends: |
| | Individual donors | | |
| | Corporate & business donors | | |
| | Earned income (ticket sales, fees for service, etc.) | | |
| | Fundraising events | | |
| | Government support | | |
| | Rotary Foundation support | | |
| | Endowment earnings | | |
| Other (identify sources): | | | |
| Organization's unrestricted cash reserves at beginning of current year | | | |
| From last year's revenue sources, please list the three single largest sources of revenue and amounts. (Sources include specific agencies, businesses, foundations, other groups / individuals. Individual donors may be listed as Anonymous. | | | |
| 1. | | | |
| 2. | | | |
| 3. | | | |

Grants greater than \$1,500 also need to provide the following:

- A Seaside Rotary Foundation Board member to mentor/ sponsor the organization.
- A cover letter on the organization's letterhead to introduce and summarize the need for this grant request addressing the Rotary Foundation's emphasis of: local / global community projects, senior citizens & youth.
- An organization brochure / description of projects / service(s) provided and population(s) served.
- Summary of Grant budget including revenues and expenditures (one page).
- Organization's annual budget for current year, including revenues and expenditures to date (1-2 pages)
- List of board of directors with affiliations, contact information, and organizational duties / responsibilities.
- Organization 501(c)(3) determination letter from the IRS

Disclaimer: an organization's submission of an application to the Seaside Rotary Foundation (SRF) requesting a grant is not a guarantee for receiving funds. Furthermore, SRF policy does not extend tax exempt status to individuals.

ALL GRANT APPLICANTS MUST READ, AGREE, and SIGN THE FOLLOWING:

With my signature I certify the following: (1) I testify that this grant application information is the truth; (2) that I am authorized by the governing board of this organization to submit this grant application to The Seaside Rotary Foundation (3) that this organization is in good standing with the IRS, retains its 501(c)(3) tax-exempt status, and is further classified as a public charity and *not* a private foundation; and (4) that this organization does not discriminate on the basis of race, color, religion, gender, gender identity or expression, sexual orientation, physical circumstances, age, status as a veteran, or national origin.

| | |
|---|---|
| Name (printed) of person representing this organization | Title (director, board chair / president) |
| Signature of person representing this organization | Date |