



**Rotary International District 7090
The Rotary Foundation Committee
District Grant Application 2016-17**

Clubs must use this application to apply for a District Grant for 2016-17 and must be in the hands of District Grants SubCommittee Chair John Teibert on or before January 31, 2016. Incomplete applications will be returned to the club with a brief explanation. The allocation of District Grant funds will be determined on a first come first serve basis. Only completed applications considered. **Please type all applications.**

Questions can be directed to any member of the District Rotary Foundation District Grant Sub-Committee as listed in the appendix to this application.

Rotary Club _____ **Club Number** _____

Does this project align with the mission of The Rotary Foundation, which is to enable Rotarians to advance world understanding, goodwill, and peace through the improvement of health, the support of education, and the alleviation of poverty? (Please select yes or no)

Does this grant fund: (Answer each question; a yes answer to any question will disqualify the project)

- | | | |
|---|----------|---------|
| 1. Continuous or excessive support of any one beneficiary or community. | Yes_____ | No_____ |
| 2. The establishment of a foundation, permanent trust or a long-term interest-bearing account | Yes_____ | No_____ |
| 3. The purchase of land or buildings | | |
| 4. Fundraising activities | Yes_____ | No_____ |
| 5. Expenses related to Rotary events such as District conferences, conventions, institutes, anniversary celebrations, or entertainment activities | Yes_____ | No_____ |
| 6. Public relation initiatives (unless they are essential to project implementation) | Yes_____ | No_____ |
| 7. Project signage in excess of \$500 | Yes_____ | No_____ |
| 8. Operating, administrative, or indirect program expenses of another organization | Yes_____ | No_____ |
| 9. Unrestricted cash donations to a beneficiary or cooperating organization | Yes_____ | No_____ |
| 10. Activities for which the expense has already been incurred | Yes_____ | No_____ |
| 11. Transportation of vaccines by hand over national borders | Yes_____ | No_____ |
| 12. Travel to National Immunization Days | Yes_____ | No_____ |
| 13. Immunizations that consist solely of the polio vaccine | Yes_____ | No_____ |
| 14. Study at a Rotary Peace Center partner university in the same or similar academic programs as those pursued by Rotary Peace Fellows | Yes_____ | No_____ |

Please note that the above restrictions are those listed in the “TERMS AND CONDITIONS FOR ROTARY FOUNDATION DISTRICT GRANTS AND GLOBAL GRANTS for grants awarded after 1 July 2013” published by The Rotary Foundation, updated to June 30, 2015. This application will be subject to the restrictions contained in the Terms and Conditions in affect at the time of the final approval.

1. DESCRIBE THE PROJECT AND ITS OBJECTIVES

Include how the project aligns with the mission of The Rotary Foundation.

2. DESCRIBE HOW THIS PROJECT WILL BENEFIT THE COMMUNITY

3. DOES THIS PROJECT INCLUDE PARTNERING WITH A CLUB OUTSIDE OF DISTRICT 7090? IF SO, HOW WILL YOUR CLUB AND PARTNERS COMMUNICATE AND WORK TOGETHER TO IMPLEMENT THIS PROJECT? (also complete section 8)

Please provide specific examples of activities.

4. LIST ACTIVITIES THAT DEMONSTRATE SIGNIFICANT ROTARIAN INVOLVEMENT.

How many Rotarians will work on this project? _____

What will they do? Give 2 specific examples. (Fundraising is not an acceptable activity for this section.)

5. ESTIMATED PROJECT DATES

Estimated Project Start Date: _____ Must be after July 31, 2016 (must not be started until Foundation trustees have provided approval of the District Grant Spending Plan – forecast July 2016).

Estimated Project Completion Date: _____ Must before May 1, 2017

6. COOPERATING ORGANIZATION

A *cooperating organization* is an organization that is directly involved in the implementation of the project, offering technical expertise and project coordination.

A *benefiting entity* is the recipient of the goods or services and is not considered a cooperating organization.

Does this project involve a cooperating organization? (Select one) Yes _____ No _____

If this project involves a cooperating organization:

1. Provide the name of the organization below.
2. Attach a *letter of participation* from that organization that specifically states:
 - a. its responsibilities;
 - b. how it will interact with Rotarians in the project; and
 - c. that the organization agrees to cooperate in any financial review of activities connected with the project; and
3. Attach a *letter of endorsement* of the organization from Rotarians.

Name of organization: _____

Letter of Participation from organization attached. _____ (Please check if applicable)

Letter of Endorsement from Rotarians attached. _____ (Please check if applicable)

7. DISTRICT 7090 ROTARY CLUB CONTACTS

Project Committee: A committee of at least three Rotarians must be established by the District 7090 club

Primary Contact

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____

Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____

Home or Office (Circle one)

Project Contact # 2

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____

Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____

Home or Office (Circle one)

Project Contact # 3

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____

Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____

Home or Office (Circle one)

8. PRIMARY HOST PARTNER IN THE PROJECT DISTRICT OUTSIDE OF DISTRICT 7090

If this District Grant Application involves a project with a Rotary project outside of our District, please complete this section. Otherwise skip and go on to section 9 – Project Budget.

List the club or district outside of District 7090 that assumes joint responsibility for the project.

Club Name Club ID No. District Country

Project Committee: A committee of at least three Rotarians must be established by the primary host partner club to oversee the project for its duration.

Primary Contact

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____
Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____
Home or Office (Circle one)

Project Contact # 2

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____
Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____
Home or Office (Circle one)

Project Contact # 3

Name _____ **Member ID** _____

Rotary Club _____ Position/Title _____

Address _____
Street Address

City/State/Postal or ZIP Code/ Country

E-Mail _____ Telephone _____
Home or Office (Circle one)

9. PROJECT BUDGET

Include a complete itemized budget for the project and indicate currency used. Use separate pages, if necessary.

Keep copies of all quotes from suppliers.-"List other suppliers from whom quotes were received". Ideally have 3 quotes per item. If 3 quotes are not available, please explain.

Item to be purchased	Name of chosen supplier	List of other suppliers from whom quotes were received (including dollar amount of quote)	Cost \$

TOTAL (identify currency) _____
 Exchange Rate Used (as per Rotary International Exchange Rate) _____
 Total in US\$ (A) _____

District 7090 club contribution	
Host club contribution (club outside of District 7090)	
Other Funding (Specify)	
Total matching District Grant funds requested from District 7090 (Matching is 1:1 of the District 7090 club contribution to a maximum of US\$2,000)	

Total in US\$ (B) _____
 (Please note the total of (B) cannot exceed (A))

10. WHO WILL OWN THE EQUIPMENT, MATERIALS, OR SUPPLIES?

11. WHO WILL BE RESPONSIBLE FOR MAINTENANCE, OPERATING AND/OR STORAGE COSTS OF THE EQUIPMENT/SUPPLIES?

12. WHAT IS YOUR PUBLICITY PLAN FOR THIS PROJECT AND HOW WILL YOU EXECUTE IT FOR MAXIMUM EXPOSURE?

13. REPORTS

Although both partners (where applicable) are responsible for completing progress and final reports, Rotary International District 7090 requires that the District 7090 club takes primary responsibility for submitting the reports to the Rotary International District 7090 Grants Subcommittee.

"By signing below, our club/district accepts primary reporting responsibility."

District 7090 Club Primary Contact's Signature

Print Name

Date

2016-2017 Club President's Signature

Print Name

Date

14. AGREEMENT FORM

This District Grant Application and Agreement Form (collectively "Agreement") is entered into by the clubs and/or district (partners) as identified above. In consideration of receiving a District Grant from Rotary International District 7090, the partner(s) agree:

1. That they understand the **Terms and Conditions for Rotary Foundation District Grants and Global Grants** (on District website) and will abide by them.
2. To utilize district grant funds to support a short-term humanitarian project, as outlined in this application, which benefits a community in need. Funds provided by Rotary International District 7090 will not be used for any purposes other than those considered eligible by The Rotary Foundation as described in the **Terms and Conditions for Rotary Foundation District Grants and Global Grants**.
3. To defend, indemnify and hold harmless Rotary International, The Rotary Foundation, Rotary International District 7090, their respective Directors, Trustees, Officers, employees, and agents (collectively "RI/TRF/DISTRICT") from any and all claims (including claims of subrogation), demands, actions, damages, losses, judgments, costs, fines, awards, liabilities, or expenses (including without limitation reasonable attorney's fees and other legal expenses) collectively ("losses") asserted against or recovered from RI/TRF/DISTRICT that result or arise directly or indirectly from the project, including any acts or omissions of the partners.
4. The partners will immediately inform District Grants SubCommittee Chair of any significant problems with the implementation of the project or deviations from the project, including deviations in the budget, as approved.
5. To complete the project **by May 1, 2017**, or sooner.
6. To submit the final report with complete financial accounting **by May 1, 2017 or within two months of the project's completion**, whichever is earlier, to the District Grants SubCommittee Chair.
7. That this Agreement may be cancelled by Rotary International District 7090 for any reason without notice upon the failure of the partners to abide by the terms and conditions set forth in this Agreement. The partners agree to return any grant funds, in their entirety, including any interest earned, should funds be misused or used for ineligible purposes.

By signing below, we acknowledge and accept the terms and conditions of this Agreement.

District 7090 Club President
(2016-2017 Club President)

Partnering Club President
Or Cooperating Organization Official
(If applicable)

Print Name

Print Name

Title

Title

District Club

Club/ District or Cooperating Organization Name

Signature

Date

Signature

Date

15. COMPLETION CHECKLIST

Before submitting your District Grant application, please take a minute to review and complete this checklist.

(Please mark each item that applies to your project. If you have any questions or concerns, please contact a member of The Rotary Foundation District Grants SubCommittee – refer to Appendix 1.)

_____ Does the project meet all grant policies and guidelines?

_____ Has your club met all the qualifications of District 7090 Annual Certification process, including provision of the Club Memorandum of Understanding and Addendum executed by the appropriate Club officers, and filing of same with District 7090 Grants Subcommittee Chair within the required time frame?

_____ Has your club met all of the conditions outlined in the Club Memorandum of Understanding including the Addendum?

_____ If this project involves a club outside of District 7090, have both the host and District 7090 partners created committees to oversee the project? Are these individuals correctly listed on the application?

_____ Have the responsibilities of the partnering club been outlined?

_____ Are the required written comments and signatures on the application?

_____ Is a *cooperating organization* involved? If so, are there letters:

_____ From the organization specifically stating its responsibilities, how it will work with Rotarians, and its agreement to cooperate with any financial review of the project; and

_____ From the District 7090 club, indicating that it has knowledge of the organization and endorses the co-operative effort?

_____ Have you kept copies of all quotes for materials, goods, or labour associated with the project?

_____ Have you made copies of all documents for your files prior to submitting the application?

_____ Have you reviewed the *District Grant Report Form* to ensure that you will be able to answer all sections?

16. DISTRICT GRANTS SUBCOMMITTEE CERTIFICATION (DISTRICT COMPLETION)

Upon review and acceptance, the District 7090 Grants SubCommittee Chair will certify the application as complete. *If the application is not complete or eligible, it will be returned to the District 7090 club.*

Submit completed applications to

The Rotary Foundation 2016-2017 Grants SubCommittee Chair

John Teibert
c/o Crawford, Smith & Swallow
43 Church Street, Suite 400
St. Catharines, Ontario L2R 7E1
Phone: (905) 937-2100
Fax: (905) 937-7363
Email: john@crawfordss.com

"On behalf of the committee, I hereby certify that to the best of my knowledge and ability this grant application is complete and meets all Rotary International District 7090 guidelines."

District Grants SubCommittee Chair Signature

Print Name

Date

FOR DISTRICT GRANTS COMMITTEE USE ONLY. - GRANT NUMBER: _____

DISTRICT NUMBER: _____

R.I. District 7090 District Grants SubCommittee Members

Karen Oakes, Director, The Rotary Foundation Committee
Phone: 519-426-2331; e-mail: oakes.kl@sympatico.ca

John Teibert, 2016-2017 District Grants SubCommittee Chair
Phone: 905 937-2100, e-mail: john@crawfordss.com

Marlee Diehl, 2016-2017 District Governor
Phone 585-682-3017, e-mail: marlee@d7090.org

John Boronkay
Phone 716-662-6185, e-mail: jrborokay@verizon.net

Bob Bruce, Paul Harris Society Chair
Phone: 905-632-6528; e-mail: pdgbob@bell.net

Pat Castiglia, Alumni Committee Chair,
Phone 716-508-8245; e-mail: ptcas34@gmail.com

Vincent (Jim) Morabito
Phone 716-634-2485; e-mail: vmora1115@aol.com

Pravin Suchak
Phone 716-868-9150; e-mail: pravin.suchak@gmail.com

Jim Wakeman
Phone 814-450-1866 e-mail: jimwakeman67@gmail.com

Art Wing, Fundraising Chair (Annual Fund)
Phone 905-685-5950, e-mail: art@arthurwing.com

Sandra Yeater
E-mail: syeater@tonawandapediatrics.com