



**FUNDING APPLICATION FORM**

**Name of Organization:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Contact:** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_

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**Amount requested: \$** \_\_\_\_\_ **Total project budget: \$** \_\_\_\_\_

**Organization's Mission Statement/Purpose:**

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**Geographic Area Serviced by this Request:** \_\_\_\_\_

**Organization Annual Operating Budget:** \_\_\_\_\_

**Number of people who will be served by this request:** \_\_\_\_\_

**Specific purpose for which funds will be used:**

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**Benefits expected by this program:**

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**Time period funds will be expended:** \_\_\_\_\_

**Other organizations contacted and amounts requested:**

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**Other information you deem important:**

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**IF THIS REQUEST IS APPROVED, WE AGREE TO PROVIDE INFORMATION TO CONFIRM THAT THE EXPENDITURE OF FUNDS WAS USED FOR THE SPECIFIC PURPOSE STATED WITHIN SIX MONTHS OF RECEIVING FUNDS FROM THE ROTARY CLUB OF SOUTH EVERETT – MUKILTEO.**

**Signature of requester:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Email completed form to: [scb@dwaynelane.com](mailto:scb@dwaynelane.com)  
Sheila Countryman-Bean, Committee Chair