Bemidji Rotary Club Local Community Service Grant Application Form



Grants will be considered on an ongoing basis, as funds are available.

See Grant Application Guidelines for more information. Complete applications can be submitted at any time.

Organization Name:	
Org Name, if listed differently o	n IRS 501(c)(3) letter:
Contact Information:	
Name:	
Title:	
Mailing Addr:	
City, State, ZIP:	
Telephone:	
Email:	
Project Title and Brief Descripti	on:
,	
Geographic Area to be Served:	
Client Group to be Served:	
Anticipated Project Timeline: (start time to completion)	
Please note which funding prior	ities fit your proposal (check all that apply):
□ Meeting "basic huma	n needs" (helping socially or economically disadvantaged people become more self-sufficient)
	at is demonstration in nature, and could be carried on by others at the conclusion of "pilot" program, start up, or special need)
☐ Small capital improve	ment or special purpose
\Box Project that benefits \Box	many individuals, rather than a few
☐ Serve the Bemidji are	a



То	tal Project Cost \$		
An	nount Requested \$		
Source & Amount of Pledges/ \$ Commitments to Date:			
Ot	her Funding Sources (& Amounts) Applied	for:	
	ease answer the following questions: You m	nay duplicate questions and make room for more thorough responses. Please keep all to 3 pages.	
1.	History and Financial Support Give a brief history of your organization including a description of its mission and a summary of your current year's budget, including principal revenue sources and amounts.		
2.	Purpose What will this project specifically ac	complish? Does the project address the cause of a problem or the consequences?	
3.	Need What are the problems that this project will try to solve? What evidence do you have of this need?		
4.	Approach How do you plan to implement thi	is project and how will Rotary's funds be used?	
5.	Coordination Who else in our community is What kind of local support is there for the proj	working on this project? How will you coordinate with them? iect?	
6.	Evaluation How & who will determine wheth	ner or not the project is working & if it accomplished its purpose?	
7.	Future Support How will this project be sustained in the future?		
8.		be recognized?) If this request is granted, would your group or organization be Lake Bemidji Dragon Board Festival (held in August of each year)?	
Sig	gnature:	Date:	
Ple	ease attach the following information:		
	☐ A copy of your IRS 501(c)(3) Certific		
	☐ A list of current Officers, Board Mer	•	
	□ Other brochures or marketing mate	erials, if available	
Со	mpleted Application should be sent to:	Bemidji Rotary Club PO Box 1321	

Bemidji, MN 56619