

# Mad River Valley Rotary Grant Application

The Mad River Valley Rotary Club fundraising activities allow us to support community-based projects with broad community appeal generally in the following categories...

**\* Healthcare \* Arts & Science \* Education \* Recreation \* International \***

Applications will be received on a year-round basis, preferably at least 90 days prior to the need for the funds, and are considered monthly at Board meetings.

*The following application must be completed in its entirety and sent by email to:*

**Dinsmore Fulton, MRV Rotary Community Chair  
Dinsmore@madriverv.com**

Should you have questions, please contact the Community Chair.

**Title of project proposed:** \_\_\_\_\_

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

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

**Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Amount requested for current project:** \_\_\_\_\_

**Date funding required for current project:** \_\_\_\_\_

**How long has the organization existed?** \_\_\_\_\_

**What is the purpose of the organization?** \_\_\_\_\_

**Have you received funding from MRV Rotary before before?** \_\_\_\_\_

**If so when?** \_\_\_\_\_

**What was the dollar amount received?** \_\_\_\_\_

**What did the project fund and what is the current status of that effort?**

\_\_\_\_\_  
\_\_\_\_\_

**What other funding for this project has been requested or committed to date?**

**Source and amount:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Describe the current project for which your organization is seeking funds: \_\_\_\_\_**

---

---

---

---

---

---

---

---

---

---

**How will our community benefit from this project and how many will be affected?**

---

---

---

---

---

---

---

---

**What fundraising activities has your group undertaken to raise funds for this project and the amount raised?**

---

---

---

---

---

---

**How will the MRV Rotary be recognized for their support? \_\_\_\_\_**

---

---

---

---

---

---

---

**The following items may be required to assess your request. Please check with the Community Chair:**

- Detailed copy of the project budget.
- Last 2 years of accountant prepared Financial Statements, including a Balance Sheet and Income & Expense Statement.
- Copy of the organization's 501c(3) determination letter, if applicable.

Thanks for your submission. We will contact you if we require further information.

---