Project Grant Application

**The Rotary Club of Alpharetta funds projects that 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. Qualified Projects must fall within the six areas of focus and deemed as sustainable, measurable and community driven. Grant applications will be approved on a rolling basis starting on July 1st of each year.**

**Eligibility Guidelines**

**All grant activities must:**

1. **Driven from Community Needs.**
2. **Consistent with the mission of The Rotary Foundation.**
3. **Include active participation of Alpharetta Rotarians.**
4. **Align with one or more of Rotary’s** [six areas of focus](https://www.rotary.org/myrotary/en/areas-focus)**.**
5. **Be** [sustainable](http://www.rotary.org/myrotary/en/document/638)**.**
6. **Results are measurable. Examples of measures can be found in** [the Global Grant Monitoring and Evaluation Plan supplement](http://www.rotary.org/myrotary/en/document/667) **from Rotary International.**
7. **Support humanitarian and educational projects**
8. **Sponsored and championed by at least one Alpharetta Rotarian Member who is in good standing.**

**Restrictions**

**Grants cannot be used to unfairly discriminate against any group; promote a particular political or religious viewpoint; support purely religious functions; or serve as a new contribution to the Foundation or another Rotary Foundation grant**

# Section 1. Contact Information

|  |  |
| --- | --- |
| Organization Name | Click or tap here to enter text. |
| Street Address | Click or tap here to enter text. |
| City | Click or tap here to enter text. | State | Click or tap here to enter text. |
| Zip Code | Click or tap here to enter text. |
| Organization Website | Click or tap here to enter text. |

|  |  |
| --- | --- |
| President or Executive Director | Click or tap here to enter text. |
| Title | Click or tap here to enter text. |
| Phone Number | Click or tap here to enter text. | Email | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Contact Person (If Different) | Click or tap here to enter text. |
| Title | Click or tap here to enter text. |
| Phone Number | Click or tap here to enter text. | Email | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Alpharetta Rotarian Sponsor | Click or tap here to enter text. |
| Requested Match Amount | Click or tap here to enter text. |
| Date of Request | Click or tap here to enter text. |
| Is this the 1st request? If not, how many request previously? | Click or tap here to enter text. |

# Section 2. Charity Organization Information

|  |  |  |  |
| --- | --- | --- | --- |
| 501(c)(3)? | Yes: [ ]  No: [ ]  | Year Established? | Click or tap here to enter text. |
| 501(c)(3) Number | Click or tap here to enter text. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Total Organizational Budget | Click or tap here to enter text. | Number of Board Members | Click or tap here to enter text. |
| Total # on Staff | Click or tap here to enter text. | Total # of Volunteers | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Organizational Mission Statement  | Click or tap here to enter text. |
| Brief Organization history(500 Words or Less) | Click or tap here to enter text. |
| Brief Description of Organization Services | Click or tap here to enter text. |
| Description of Population Served  | Click or tap here to enter text. |

# Section 3. Partnership with Alpharetta Rotary

|  |  |
| --- | --- |
| Will the Project Engage Alpharetta Rotarians | Click or tap here to enter text. |
| Describe partnerships with other community organizations, including other Rotary Clubs pertaining to this project. (Please be specific regarding other groups offering their volunteer hours and financial support). | Click or tap here to enter text. |
| Describe the opportunities for increased public awareness of Alpharetta Rotary, your organization and the project. | Click or tap here to enter text. |

# Section 4. Project Information (Required if request is $1,000 or more)

|  |  |
| --- | --- |
| Project Information – Explain in detail. | Click or tap here to enter text. |
| Total Project Budget | Click or tap here to enter text. |
| Requested Amount | Click or tap here to enter text. |
| Percent of Total Budget | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Project or Program Description | Click or tap here to enter text. |
| Goals of Project | Click or tap here to enter text. |
| How will grant be used to achieve goals | Click or tap here to enter text. |
| What is the timetable for using this grant to achieve these goals? | Click or tap here to enter text. |
| How will the project be measured for success? (please be specific) | Click or tap here to enter text. |
| Is there an opportunity for a Rotary service project? | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Type of Grant Request | Choose an item. |
| Date of Request | Click or tap here to enter text. | Date Needed By | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Geographic Area Served (Specific to the Grant) | Click or tap here to enter text. |

# Section 5. Supporting Documentation

|  |
| --- |
| [ ]  Proof of IRS federal tax-exempt status[ ]  List of Board of Directors with bios[ ]  Project Budget[ ]  Organizational Budget & Financial Statements |