PWR Grant Review Committee

**GRANT APPLICATION**

Rotarian Sponsor’s Name (if applicable):

Date: Amount of Request $:

Organization Information

Name of Organization:

Payee (if different):

Tax Exemption Number:

Address:

Phone: Fax:

Contact Person

Name & Title of Contact Person:

Day Phone: Evening Phone:

Fax: Email:

Grant Request Information

1. Describe (briefly 100 words/less) the purpose and activities of your program/organization. (Mission Statement):

2. State the Services, Program, or specific Purposes for the requested funds.

3. Please check one of the following:

a) This is a new program or service

b) This is the expansion of an existing program

4. Fully describe the impact this funding will have, including numbers of children/families this funding will benefit.

5. What other funding sources & requested amounts are you seeking for this purpose?

6. How will you continue the programs/activities and/or services after this funding?

7. Please provide an exact breakdown (budget) on how the requested funds will be used.

8. Will the grant from Point West Rotary be publicly recognized?  Yes  No. If yes, please describe.

Indicate below the time frame for funding to launch intended purpose.  (For example, if you are requesting a grant for a field trip, what is the deadline for receiving the funds?  Say in September you request funding for a field trip or equipment purchase but the deposit for the fieldtrip isn’t due until October or the equipment won’t be purchased until after the following March, let us know).