



# THE ROTARY CLUB OF SKOKIE VALLEY FUND ALLOCATION FORM

The Rotary Club of Skokie Valley and its affiliated foundations invite proposals for contributions to bona fide charities and worthy individuals needing assistance. The Club requests that any individual or organization seeking funding complete this form. It can be returned to any Rotarian, or mailed to **Rotary Club of Skokie Valley Attn. Carolyn Anthony P.O. Box 424 Skokie, IL 60077.**

**Clearly mark the envelope FUND ALLOCATION FORM**

Preference will be given to charities or individuals with strong ties to one or more of our communities (Skokie, Lincolnwood, Niles) and Morton Grove). Preference will also be given to causes which involve individual Rotarians as volunteers, and which provide unique programs or services. Those receiving grants, which may be renewable, should be prepared to report to the club regarding the results and effectiveness of the contribution.

**Requesting Organization:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_

**Name/title of person completing this application:** \_\_\_\_\_  
**Name/title of contact person:** \_\_\_\_\_  
**Tax Status: 501 (c) (3) yes/no 509 (a) yes/no Municipal Gov't. yes/no School yes/no Park District yes/no other gov't. agency yes/no (explain yes):** \_\_\_\_\_  
**If no to all above, how do you qualify for charitable donations?** \_\_\_\_\_  
**List Skokie Valley Rotarians actively involved in your organization, with offices held, if any:** \_\_\_\_\_

**Percentage of organization budget from taxes** \_\_\_\_\_ **United Way** \_\_\_\_\_  
**Percentage of budget for this specific project from taxes** \_\_\_\_\_ **United Way** \_\_\_\_\_

**Briefly describe the project. You may continue on forms, announcements, or other materials:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is the organization eligible for matching funds for this project? Yes/no If yes, from where:** \_\_\_\_\_  
**Have you applied for other grants for this project? yes/no Received any? Yes/no (Attach details):** \_\_\_\_\_

**Approximate budget for this project?** \_\_\_\_\_ (Attach details)  
**Prior year actual budget, if repeat project?** \_\_\_\_\_ - (Attach details)  
**Number of Professional staff members:** \_\_\_\_\_ **Volunteers:** \_\_\_\_\_ who will be involved with the project.  
**How will this projected be evaluated?** \_\_\_\_\_ (Attach prior year evaluation, if any.)

**Approximate percentage of total population, which will benefit from this grant living in Skokie:** \_\_\_\_\_ **Lincolnwood:** \_\_\_\_\_  
**Niles:** \_\_\_\_\_ **Morton Grove:** \_\_\_\_\_ **Other communities:** \_\_\_\_\_  
**What other ties to one or more of these communities exist?** \_\_\_\_\_

**Services offered by your organization (check all that apply):** Arts and Culture \_\_ Civic/economic development \_\_  
Education \_\_ Environment \_\_ Health \_\_ Human Services \_\_ Parks/recreation \_\_ Seniors \_\_ Youth \_\_

**Does the organization have a policy against discrimination based on race, religion, color, creed, sex, or national origin? yes/no (Explain):** \_\_\_\_\_

**Amount requested:** \_\_\_\_\_ **Desired payment date:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date** \_\_\_\_\_

**THIS APPLICATION ALONG WITH OTHER DOCUMENTS MUST BE TURNED IN BY APRIL 25, 2019**