Rotary Club of Arlington Heights, IL

GLOBAL AWARENESS PROPOSAL COVER SHEET

(Please attach proposal to this one-page form.)

Program Title:

School/Class:

Name of Program Director:

Address:

Telephone: Email Address:

Name of Program Treasurer:

Address:

Telephone: Email Address:

Annual Total Budget: $

Amount Requested from Rotary Club of Arlington Heights: $

Is it expected that this program will become self-sustaining in the future? Yes No

If yes, briefly explain your plan your plan/time frame for achieving that status.

If no, briefly explain why your program may need continued support beyond a 1-3 year period.

Is this your first request for funding? Yes No

Central Purpose of the Proposed Program: