## ROTARY CLUB OF SANTA BARBARA NORTH CHARITABLE FOUNDATION

 POST OFFICE BOX 3293 SANTA BARBARA, CALIFORNIA 93130

# MEMO TO GRANT APPLICANTS

RCSBNCF provides grants twice per year, once in the spring and again in early winter. Organizations making a grant application to the Rotary Club of Santa Barbara North Charitable Foundation must do so by the use of the attached form, filling in the spaces on the face side only. Please use attaching sheets if necessary. Do not use the back of the form.

In preparing your application, please refer to the attached Policy Statement of January 24, 2005 covering grants. We also encourage you to attach materials about your organization which will be helpful to our Grants Committee: brochures, mission statement, financial statements and names of board members.

Please submit this application to the Foundation no later than April 30 for consideration at the July meeting of the Foundation's Board of Directors, or no later than November 30, for consideration at the January meeting. We believe the form is self-explanatory but if you have questions, please contact me at (805) 568-5313.

Sincerely,

Michael J. Bergquist, President

Attached: Policy Statement, Grant Application Form

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# **POLICY STATEMENT REGARDING GRANTS**

January 24, 2005 (Revised)

1. The Rotary Club of Santa Barbara North Charitable Foundation ("the Foundation") uses the following guidelines to distribute funds at its disposal. Distributions may be made to:
2. The Rotary International Foundation.

b. IRC 501 (c)(3) non-profit tax-exempt organizations which provide

 services in the Santa Barbara area. Projects outside the Santa

 Barbara area may also be funded in cooperation with the

 charitable foundations of other Rotary Clubs.

1. Projects undertaken by RCSBNCF itself.
2. Generally funds will be distributed for capital expenditures/improvements and seed money or equipment for new projects. Contributions are made on a one-time basis with no assurance that subsequent funding will be forthcoming. Exceptions to these general guidelines can be made at the Board’s discretion. Applications for funds to meet the ordinary day-to-day expenses of an organization will not be considered. Applications for political advocacy purposes of any type will not be considered.
3. Funding periods will coincide with the Foundation's fiscal year ending June 30. Applications for funding must be submitted to the Foundation no later than November 30 for consideration at the January Board of Directors meeting and no later than April 30 for consideration at the July Board of Directors meeting.
4. Applications should be submitted on the Foundation's grant application form and include the following:
5. For those agencies which have not previously received funding

from the Foundation, a brief history and description of the agency

and its programs.

1. A statement of the problem or need to be addressed by the grant

and the benefits to be realized by the community if the application

is funded.

1. If the purchase of equipment or materials is involved, a brief description and the approximate cost of same.

## ROTARY CLUB OF SANTA BARBARA NORTH CHARITABLE FOUNDATION

 POST OFFICE BOX 3293 SANTA BARBARA, CALIFORNIA 93130

### GRANT APPLICATION

Legal Name of Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person & Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funds will pay for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Organization’s Mission Statement \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Method of operation & area covered\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Number of persons benefiting from Applicant’s program(s) in the last six months\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a 501(c)(3)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year formed or incorporated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No. of Board members\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No. of Advisory Committees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Employees\_\_\_\_\_\_\_\_\_ Full time\_\_\_\_\_\_\_\_\_ Part time\_\_\_\_\_\_\_\_\_ Volunteers\_\_\_\_\_\_\_\_

Total number of corporate or voluntary association members\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are facilities owned, leased or rented?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source and Amount of grants in past year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Current Year Annual Budget $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount of this request $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summarize your grant request (two to three sentences):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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##### CERTIFICATION

We certify that the undersigned are authorized on behalf of the applicant organization to apply for this grant, that the funds requested in this application are urgently needed by this organization for the accom-plishment of its charitable purpose and that, if received, will be used exclusively for the purpose of:

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

We further certify that the information in this application is to the best of our knowledge true and accurate and is submitted with our Board’s full knowledge and endorsement.

Name & Title of Authorized Board/Governing Body Representative(s) Signature Date

DO NOT USE THIS SIDE.

FOR FOUNDATION USE ONLY.

Assets as of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Total Expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of Income:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Previous Record with Foundation: Request Decision

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Additional Appropriations:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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