Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person and title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Does your organization have 501 C (3) status? ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is requester’s relationship to Highlands Ranch Rotary?

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

Amount requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date funds are to be used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your organization previously requested funds from this Rotary Club? Yes \_\_ No\_\_\_

Does your project promote the ideals of Rotary? Mark all areas of focus which apply:

Water & Sanitation \_\_\_\_ Disease Prevention & Treatment\_\_\_\_

Maternal & Child Health \_\_\_\_ Basic Education & Literacy \_\_\_\_

Community & Economic Impact \_\_\_\_ Developing Environmental Stability \_\_\_\_ Peace & Conflict Resolution \_\_\_\_

Can someone represent your organization as a speaker at one of our meetings?

Is there a way visibly to recognize HRRF’s contribution to your organization via website or some other community communication? Yes \_\_\_\_ No \_\_\_\_

Provide the requested information on page 2.

Submit this completed application to:

Highlands Ranch Rotary Foundation, Inc.

PO Box 632118

Highlands Ranch, CO 80163-2118

**IMPORTANT NOTICE**: Please note that the Highlands Ranch Rotary Foundation requires that the funds awarded be expended for the purposes outlined in the charitable request. If the funds are expended in a manner different from the request, the grantor will request that the funds be returned. Submitting your application indicates your understanding and acceptance of these conditions set by the grantor.

Describe your organization and the primary sources of funding.

How would the requested funds be used?

Will it be for ongoing operations or specific needs?

Describe the specific proposed project and the community it will serve.

Attach any additional relevant information and/or brochures.

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

 Signature Date

 Title

 Page 2