

**Rotary Club of Hackensack  
P.O. Box 471  
Hackensack, New Jersey 07601  
Community Grant Application  
Email: staceyb@athomecompanions.com**

Please respond to the following sections of the application succinctly and as simply as possible. Respond on the application itself and limit your response to the space provided. Do not attach supporting documents unless necessary to support the request for funding. Submit the completed application to the above address by **April 15, 2024**.

\_\_\_\_\_ I have read and understand the attached grants program guidelines



Name of the Organization \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Contact Person and Title \_\_\_\_\_

Federal Identification Number \_\_\_\_\_

The Organization was incorporated in the State of New Jersey in \_\_\_\_\_ (Year)

Type of Not-for-Profit Organization: 501(c) 3 \_\_\_\_\_ Other \_\_\_\_\_ (Specify)

Is the Organization Registered with the Office of Consumer Affairs? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the Organization's Charities Registration Number? \_\_\_\_\_

What is the organization's annual budget? \_\_\_\_\_

A. Briefly outline the mission or goals of the organization.

B. Describe the proposed project or program including the objective to be achieved and the *specific way that it will serve residents of Hackensack*.

C. Rotary is a service organization dedicated to community service and the promotion of high ethical standards in business and professional life. How does this project conform to the goals of Rotary?

D. Provide the planned date(s) of implementation (between July 1, 2023, and June 30, 2024). Describe the target population to be served by the project and the anticipated number of participants.

E. Provide a list of proposed expenditures and the cost of each. Note that grants will be limited to fifteen hundred dollars (\$1,500) unless there are compelling circumstances.

F. To what extent is the proposed project dependent on the requested Rotary grant? If the proposed project is not funded by Hackensack Rotary, will it be implemented using other resources?

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\*I certify that the above information is, to the best of my knowledge, accurate and truthful.  
\*I authorized the submission of the above project and, if funded, affirm that funds will be used only as proposed.  
\*I agree that I, or a designee, (a) will attend a meeting of the Hackensack Rotary to accept the grant and  
(b) following project implementation to report on the results of the project.

Signature \_\_\_\_\_ Title \_\_\_\_\_



Print Name \_\_\_\_\_ Date \_\_\_\_\_