Steubenville Rotary Foundation
Grant Application

PLEASE COMPLETE THE APPLICATION IN FULL AND PROVIDE THE REQUESTED INFORMATION

DATE of Application _____

AMOUNT Requested $_____   Needed by _____

Name of Organization _____

Address _____

City, State, ZIP_____

Director/Contact name _____

Phone _____Email _____

Person Completing Form_____

Phone _____ Email _____

Mission Statement or Guiding Principles:

_____

_____

_____

_____

_____

Grant request is for:

____General Operating Expenses   ____Capital Campaign

____Special Project (Name of Project) _____

Explain briefly how the funds will be used _____

_____

_____

_____

Financial Information:
If requesting $1000 or more please provide copy of 990 EZ. See form below or follow the link.
Income
Donations	$ _____
Grants	$ _____
Services (fees for services)	$ _____
Fundraising (gross)	$ _____
Other	$ _____
Total Income	$ _____

Expenses
Salaries and Benefits	$ _____
Building (rent, utilities, etc.)	$ _____
Services Provided	$ _____
Fundraising Expenses	$ _____
Other	$ _____
Total Expenses	$ _____

Our organization operates on a Calendar Year (Jan – Dec)
                              Fiscal Year (From _____ to _____)

Provide a Board of Directors or Advisors List and their positions (Chairman, Treasurer, Secretary, etc)   Be sure to include your organization name on the list.

Grant Applications will be received from January 1 to March 31.   Applications will be reviewed by the Foundation Committee and recommendations will be made to the Rotary Club of Steubenville Board of Directors. Funds will be dispersed from April 1 through December 1.

Funding will be based on Local Community needs in accordance with Rotary International Areas of Focus:

- Basic Education and Literacy
- Maternal and Child Health
- Peace and Conflict Resolution
- Environmental
- Clean Water and Sanitation
- Disease Prevention and Treatment
- Economic and Community Development

I attest that all information included in the application is true and accurate. I am willing to answer any questions the Foundation Committee may have in relationship to this application and how we would utilize any awarded funds. I understand we may not receive the requested amount due to the available funds of the Steubenville Rotary Foundation

_____

Signed

_____

Print Name

_____

Date