**Stillwater Rotary Club**

**Taste of the Valley Spotlight Organization**

**Grant Application**

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| **Organization Name:** | **Contact:** |
| **Address:** | **Title:** |
| **Email Address:** | **Phone:** |
| **Amount Requested ($5000-$15,000):** |

1. **Has your organization received funds from this event in the past 3 years? \_\_\_\_ Yes \_\_\_\_ No**
2. **Describe your organization’s core mission.**
3. **How long has your organization been in existence? Please provide background on the stability of your organization. Are you a registered 501(c)(3) organization?**
4. **Describe your organization’s specific needs for the requested funds? How significant will these funds be to advance this project or service? How much of an impact can be made?**
5. **How does the specific project support children, youth and families, community health, the arts, the environment, special needs individuals, or people without basic needs for food, housing, or healthcare?**
6. **Describe how your organization would engage in the fund-raising/ticket selling associated with the Taste of the Valley event?**

**Please email your completed application to Ted Wegleitner at** **Theodore.t.wegleitner@healthpartners.com** **and**

**Robin Anthony at** **director@greaterstillwaterchamber.com****.**