

Uptown York  
**Rotary**  
Club



## COMMUNITY GIVING PROGRAM

Grants approved by the Rotary Club of Uptown York are to support programs that service York and the York County community. We are particularly interested in supporting organizations whose best practices and initiatives support Rotary's [Seven Areas of Focus](#). The most successful and sustainable Rotary service tends to fall within one of these areas of focus: Maternal and Child Health, Basic Education and Literacy, Economic and Community Development, Peace and Conflict Prevention/Resolution, Disease Prevention and Treatment, Water and Sanitation, Environment.

Not for profit or 501(c)3 organizations may apply for a grant. Selection criteria includes, but is not limited to:

- How well the project demonstrates the use Rotary's Seven Areas of Focus
- The level of impact on the community
- The level of documented need for the program/project and/or the grant funding
- The level of collaboration with other organizations or community initiatives
- Clearly defined measures of success
- Rotarian involvement (individual/group)

Applicants are asked to describe the sustainability of the project after the grant funds have been disbursed. Funding is **not** considered for ongoing operating costs of an organization, capital campaigns, scholarships or stipends for individuals.

All applicants will be notified of the committee's selection no later than one month after the grant application deadline. If you have any questions, please do not hesitate to contact us.

Sincerely,

*Judy*

Judy Chambers  
Community Giving Committee Co-Chair  
Uptown York Rotary Club  
[judyc1950@verizon.net](mailto:judyc1950@verizon.net)  
(717) 495-5457

*Mike*

Michael Connor  
Community Giving Committee Co-Chair  
Uptown York Rotary Club  
[mconnor860@aol.com](mailto:mconnor860@aol.com)  
(717) 350-3049



**COMMUNITY GIVING GRANT APPLICATION**

To enable us to fairly evaluate requests for charitable grants, please fill out this form completely. Please limit your information to the Grant Application pages only. Supplemental brochures or documents may be included with the application packet. The applicant does not need to be a 501(c)3 organization, however priority may be given to charitable organizations or those that have Rotarian involvement.

- The Uptown York Rotary Club awards grants for specific programs or projects.
- We do not fund salaries, stipends, capital campaigns, or overhead expenses.
- If your organization is awarded a grant, you will be required to submit a post grant report to the Rotary Club of Uptown York.

Name of Organization \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Email Address \_\_\_\_\_ Phone # \_\_\_\_\_

**Please answer the following questions regarding your project:**

1. Succinctly describe the program or project and timelines for which grant money will be used:

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

2. What problem does this project address and why did you choose this project?

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

3. What impact will the project have on the community and how will you measure the impact?

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4. How will your organization build the visibility of the Rotary Club of Uptown York with receipt of this grant?

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5. List project activities and other organizations with whom you will collaborate.

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6. List the geographic area covered by your organization and the effect a grant will have on the area.

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7. Estimated # of York individuals served by this grant request? \_\_\_\_\_

8. Is this a new or substantially new program?  Yes  No

If you answered no, please describe the prior program results:

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9. If you have previously received a grant from Rotary, please list the Club and year.  
Club: \_\_\_\_\_ Year: \_\_\_\_\_

10. Are you on file with the PA bureau of charitable organizations?  Yes  No

If yes, please list your certificate # \_\_\_\_\_

**Please answer the following questions regarding funding:**

Amount of Grant Funds Requested: \_\_\_\_\_

Total Cost of Project: \_\_\_\_\_

How much of the total have you secured as of today: \_\_\_\_\_

If the entire request is not awarded, will the program still be implemented?  Yes  No

If additional funds and/or sustaining funds are needed, how will you address this issue?

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

**List other funding sources and amounts under consideration:**

Funding Source \_\_\_\_\_ Amount \_\_\_\_\_

Funding Source \_\_\_\_\_ Amount \_\_\_\_\_

Funding Source \_\_\_\_\_ Amount \_\_\_\_\_

**List how funds will be spent:**

Amount \_\_\_\_\_ Description \_\_\_\_\_

Amount \_\_\_\_\_ Description \_\_\_\_\_

Amount \_\_\_\_\_ Description \_\_\_\_\_

Amount \_\_\_\_\_ Description \_\_\_\_\_

Amount \_\_\_\_\_ Description \_\_\_\_\_

\$ \_\_\_\_\_ Total Funds Requested

I hereby certify that the governing body of the above listed organization or a committee authorized to act on its behalf has approved this application. I also certify the agency has the resources in place and is prepared to carry out the project should the funds be granted.

Print name of person completing the application: \_\_\_\_\_

Title of person completing the application: \_\_\_\_\_

Signature of person completing the application: \_\_\_\_\_

Date completed: \_\_\_\_\_

**Please submit your completed application and accompanying documents in a .pdf format to Mike Connor at [mconnor860@aol.com](mailto:mconnor860@aol.com).**