The Downtown Rotary Club of New Braunfels Grant Application Instructions:

Welcome to the application process to request funding from:

The Downtown Rotary Club of New Braunfels.

It is vital that you follow the instructions fully, accurately and carefully if you want your request to be considered. Complete the Application below, which is a fillable PDF document.

NOTE: The Downtown Rotary Club is interested in funding specific projects or needs. To increase the likelihood your organization will be invited to present, gain a recommendation for funding and approval by the Board of Directors and General membership, we strongly suggest your request be for a specific measurable project or need. Funding requests for general operating expenses are not likely to be recommended to the Board for Approval.

An application request must be for one and only one project or need and it must be quantifiable, specific and measurable.

If you are seeking funding for multiple projects or needs you must make a separate request for each one.

The Donations Committee will first review each application;

- 1. to ascertain if it is COMPLETE
- 2. you have supplied any required documentation
- 3. has arrived by the deadline

Failure to comply means that your Request will not be considered.

The Donations Committee will review all remaining Requests and schedule live presentations during the month of February 2020, and if requested, you must present your proposal in person for consideration.

When you have COMPLETED the Application Form, you must save it electronically and email it to: DonationsDTR@gmail.com. You will receive a reply confirming your Application document has been received. If you do not receive a confirmation email, please send a follow-up email within 15 days of the original submission. No Applications or follow-up emails will be accepted after the closing date of January 31, 2020.

Address Website Phone Name of Primary Contact/Applicant Email Address of Contact/Applicant Tax Status: Exempt Federal Tax ID Number Taxable Year Founded List of Directors and Officers Current position 1 2 3 4 5 6 7

SECTION 2: State the Mission of your Organization

Additional directors to be noted in "Comments" section

SECTION ONE: Name of Applicant

Overview / purpose of this and other programs offered				
Percentage of Administrative costs per dollar Revenue/Income				
		%		
What geographic area is served by this Organization? (If part of a larger Organization, describe the geographic area served by the local organization and the parent.)				
Are you participating in the Big	g Give SA in 2020?	Yes No		
If yes, are you proposing to use any of our grant for their matching fund program or as prize money?				
Amount:				
Describe the supplementary fur	ndraising activities conduc	eted by the organization.		
(ex. Donations from Board Members, organization members, fundraising events, social events, etc.)				
List activity	Net Results	Time/Month(s) Held		

Are matching funds available?	Yes	_ No
If yes, please explain.		
Have you received money from the Downtown Ro	tary Club o	f New Braunfels in the past?
	Yes	_ No
If yes, please provide the date, amount received and	d a short star	tement about that project/need.

SECTION 3: Project Description

Please describe the project or need to be met by this request. The description should include sufficient information for the Committee Members to understand EXACTLY how the funds will be employed:

How many individuals were served in the last calendar year
by your Organization?
How many individuals will be served in this current calendar year
by your Organization?
What is your Total Revenue/Income
for the current Fiscal year?
What is the Total Cost per individual served?
Current Cash on Hand
SECTION 4: SUPPORTING DOCUMENTATION
Please scan and attach the following supporting documents if applicable:
Your most recent, full year Financial Statement
Your most recent IRS Form 990
A copy of your IRS Determination Letter showing your Filing Status
Signature of Primary Contact:
(Typing your name on the above line and returning the document will constitute an affirmation of the accuracy of the statements and desire to pursue funding from the Downtown Rotary Club of New Braunfels)
Title of Primary Contact:
Date:
Signature of Authorized Officer or Board Member
Position
Date:
(Typing your name on the above line and returning the document will constitute an affirmation of the accuracy of

the statements and desire to pursue funding from the Downtown Rotary Club of New Braunfels)

What other sources of funds will be available to you for this project or need?

REVIEW:

All field are accurate and complete

Download a copy for your records.

Email the Application to DonationsDTR@gmail.com.

SECTION 5: Comments / Additional Information