

**2023 Grant Application**

**Guidelines & Requirements**

1. Each year, funds are raised through a variety of means by the Rotary Club of Seguin and are disbursed as grants to 501(c)(3) organizations in Guadalupe County.
2. All disbursements will be made in accordance with established policies and procedures of the Rotary Club of Seguin. Grants range from \$500 to \$2,500.
3. Organizations and activities desiring funding must submit a written application for the funds by completing a General Information Form (attached). The form must be completed by an authorized representative of the organization/agency. This cover form must be signed by a member of the Rotary Club of Seguin as the sponsor. Incomplete grant requests will not be considered.
4. All requests must be received no later than October 30, 2023 and will be reviewed by the Rotary Club of Seguin Board of Directors based on the written materials provided. Unless specifically requested by the Board, no presentation will be made in person by representative(s) of the requesting organization/agency on behalf of the request. The Board’s Grant Committee is charged with reviewing funding requests and either approving funding requests or making recommendations to the membership of the Rotary Club of Seguin for approval.
5. All materials submitted by any organization/activity shall become the property of the Rotary Club of Seguin and may be made available to its Board and Membership.
6. Requests for funds may be submitted at any time. Requests will be considered at the November 2022 meeting of the Board of Directors.
7. All allocations are one-time disbursements and no future commitment is automatic or implied.
8. The Board will inform requestors within 30 days following its November board meeting unless the amount of the request requires membership approval.

The **Rotarian** submitting the application should answer the following questions and sign below. If the answer to any of these questions is “No,” the grant request will not be considered.

	<b>YES</b>	<b>NO</b>
This organization is located in or serves Guadalupe County	_____	_____
This organization is a 501(c)3 organization	_____	_____
Request has been signed by the organization’s authorized representative	_____	_____
Two years income statements and balance sheet for the organization are attached	_____	_____
The application has been fully completed	_____	_____

\_\_\_\_\_  
**Signature of Sponsoring Rotarian**  
**Printed Name:** \_\_\_\_\_

\_\_\_\_\_  
**Date**

**Application**

Name of Organization: \_\_\_\_\_

Name & Title of Representative: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Day time telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

Describe the purpose of your organization/agency:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long has your organization/agency been in existence? \_\_\_\_\_

What is your current operating budget: \$\_\_\_\_\_ (*financial statement required*)

What are your major sources of funding?  
\_\_\_\_\_  
\_\_\_\_\_

Do you receive funding from the United Way? \_\_\_\_\_

If yes, provide your most recent allocation & amount: \$\_\_\_\_\_ YEAR\_\_\_\_\_

What amount of funds are you requesting for this grant? \$\_\_\_\_\_

What is the specific purpose for which you are requesting funds? (attach additional pages if needed)

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

Conservatively, how many people do you think will be affected by your grant? \_\_\_\_\_

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICATION CHECKLIST**

- \_\_\_\_\_ Cover page signed by sponsoring Rotarian
- \_\_\_\_\_ Completed application
- \_\_\_\_\_ 501(c)3 certification
- \_\_\_\_\_ Last two year income statement and current balance sheet
- \_\_\_\_\_ All supporting documentation about how the grant will be spent
- \_\_\_\_\_ All required signatures
- \_\_\_\_\_ Place in the mail by due date October 30, 2023

I permit the review of this application and records of the organization applying for this grant by anyone representing the Rotary Club of Seguin during the selection process for the grant of which I am applying. I understand it is my responsibility to have reviewed all the eligibility requirements and rules. I affirm all the information provided on this application is true and complete to the best of my knowledge. I understand the Rotary Club of Seguin will have the final decision on the eligibility of each applicant, and, if for any reason an applicant is found to be ineligible by the Board of Directors, the grant shall not be considered. If awarded this grant, I authorize the Rotary Club of Seguin to use my name and/or image for promotional purposes.

By signing this, I understand and adhere to the requirements listed above.

\_\_\_\_\_  
Signature of Organization/Agency Representative

\_\_\_\_\_  
Date

**SUBMIT ALL MATERIALS INCLUDING SPONSOR COVER PAGE TO:**

Rotary Club of Seguin  
Grant Funding Request  
P.O. Box 205 | Seguin, Texas 78156