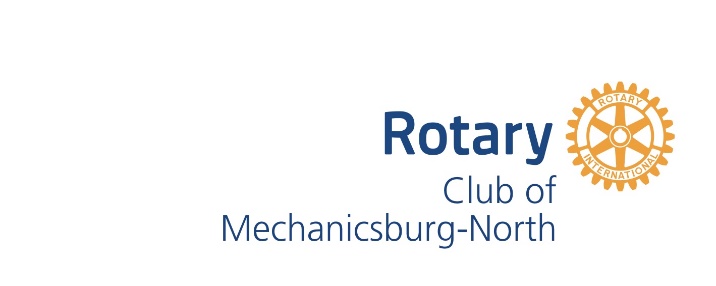
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**Annual Application for Grant Funding**

**Organizational Program or Special Project**

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. ORGANIZATION

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

Year Founded: \_\_\_\_\_\_ Current Annual Operating Budget: $\_\_\_\_\_\_\_\_\_\_

Executive Director/CEO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant Contact Person/Title (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (principal/admin office): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Twp/Boro: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

Contact Phone: (O)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C)\_\_\_\_\_\_\_\_\_\_\_\_\_

Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the organization received funding from the RCMN in the past? \_\_\_\_\_\_

IRS Tax Determination Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (attach IRS letter)

Funding: Organizational Program or Special Project:

1. Purpose (check one): Organizational Program\_\_\_\_\_\_ or Special Project \_\_\_\_\_\_\_ Organizational Programs are programs that are designed to help solve a specific problem in the community with no specific timeline. Special Projects are tasks that are completed to accomplish specific goals for a project within a given timeline.
2. Amount Requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Project Cost: $\_\_\_\_\_\_\_\_\_\_\_\_

Funding requested should not exceed $1500 for the 2023-2024 Rotary year.

1. List other major sources/funding partners for project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Full Description of the Funding Request (100 words or less): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Organizational Program or Special Project Goals: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Budget (attach detailed budget and any receipts you may have for grant request):

$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Impact of Funding (describe who will benefit and number served): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Project Beginning: \_\_\_\_\_\_\_ and Ending: \_\_\_\_\_\_\_\_\_\_Dates
3. Geographic Area to be Served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. List Rotary Club of Mechanicsburg-North members who have provided significant volunteer service to the organization and describe their role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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ALIGNMENT WITH ROTARY INTERNATIONAL’S 7 AREAS OF FOCUS:

Choose which of these areas best describes your request:

\_\_\_\_ Peace and conflict resolution

\_\_\_\_ Disease prevention and treatment

\_\_\_\_ Water and sanitation

\_\_\_\_ Maternal and child health

\_\_\_\_ Basic education and literacy

\_\_\_\_ Economic and community development

\_\_\_\_ Protection and Conservation of the Environment

AGREEMENT:

I certify, to the best of my knowledge that the tax-exempt status of this Organization is still in effect.

I certify that all of the information I’ve provided is accurate and current.

I agree to do a presentation at a meeting of the Rotary Club of Mechanicsburg-North or have a designee who is involved with the program or project do the presentation.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Director/CEO Date

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

Grant Contact Person Date

Attachments Included:

\_\_\_\_ IRS Determination Letter

\_\_\_\_ Detailed Grant Budget

NOTE: Please email this application to: [funding@mechanicsburgnorthrotary.org](mailto:funding@mechanicsburgnorthrotary.org).

The Rotary Club of Mechanicsburg-North will confirm receipt of your application via email.