



Project Name	
Club Name	Club Number
Primary Contact Name	
Email	Phone
Area of Focus (Optional)	
eace and Conflict Resolution/ Naternal and Child Health	Prevention Disease Prevention And Treatment Water And Sanitation  Basic Education And Literacy Economic And Community Development
Primary Activity (Enter One)	
	upply/Access Education: General Education: Scholarships raining/Study Team Travel: Volunteer Services eral Community Development: Disaster Recovery
ctivity is being funded, who is	nce to explain the project. This project description should provide information about what benefitting from the activity, and the name of the location of the project or activity, including e, "Five computers provided to schools for children in Addis Ababa, Ethiopia."
•	d include what needs have been identified, how the project will meet those needs, and the e specify what the project funds will be used for.





### Project Budget in US Dollars (Use additional sheets if necessary)

Item	Price		Supplier		Comments		
						_	
Total Project Budget in US Dolla	ars (Must Ma	tch Project Financin	g)				
Project Financing in US Dollars	(Use additio	nal sheets if necess	ary)				
Source ( e.g. Rotary Clu	ıb of )	Cash			DDF		
Total Project Financing in US D	ollars (Must I	Match Budget)					

Note: District 5240 will only match contributions from Rotary Clubs in District 5240. This restriction does not prevent you from obtaining cash contributions from other sources





### **PROJECT DETAILS**

Where will the work be	done?
What needs will your project address?	
How will your project meet these needs?	
Who are the beneficiaries?	
How will the funds be used?	
What is the project time line?	
How will Rotarians be involved in the project?	
How will you publicize the project?	





Cooperating Organization (if any):

Is another organization directly involved in the implementation of this project by providing technical expertise or staff? If so, please provide the name of the organization and a description of their role in the project. Attach a letter from an authorized member of the organization indicating their role in the project, how they will work with Rotarians to implement the project and their agreement to cooperate in a financial review of their activities associated with this project.

Name of Cooperation	
Name of Cooperating Organization (if any)	
Organization (ir arry)	
Role of Cooperating Organization:	
Is there other	
information you would like to	
provide to the	
District Grants	
Subcommittee?	





### **Project Committee**

Club President-Elect Signature (President

RY 2019-20)

A committee of at least three Rotarians must be established in the sponsoring Club. It is the committee's responsibility to coordinate the project locally, monitor funds, and provide financial accounting to the District 5240 Grants Committee in accordance with the "Terms and Conditions" of this agreement for the duration of the project. District Grants require the direct involvement of Rotarians who will conduct the following: A. Assessment of community needs and development of a project plan; B. Establishment of a committee containing at least three Rotarians to oversee the expenditure of funds; C. Oversight of grant funds; D. Involvement in the implementation of projects; E. Provision of evidence of community involvement and ownership; F. Organization of meetings with local service providers, local officials, and/or recipients; and G. Promotion of projects and Rotary involvement in projects in local media. At least one member of the Project Committee must be a Director of the sponsoring Rotary Club

	Primary Contact	Committee Member	Committee Member
Name			
Rotary Position			
Email			
Preferred Phone			
A. Acknowledge that the District Cacceptance of the Final Report. B. District will not be used for any puterms and Conditions. C. We have especially, <b>Section II, DG Rotarian</b> (TRF), District 5240, their respecting and all damages, losses, judgment and costs of litigation, asserted or project. E. That this agreement must forth herein. F. <b>Reporting.</b> The Proproject completion but in no case of California, USA, govern this Agr	ccepting Project Funding, the sponso Grant is a reimbursement grant. DDF To utilize the Project Funds to support of the TRF District Grant Terms and Involvement. D. To defend, indemnive Directors, Trustees, Officers, employed to costs, fines, awards, liabilities, and recovered from RI/TRF/District, that ay be cancelled for any reason with coject Sponsoring Club will submit the later than June 30 of the Rotary Year ement.	will be paid to the sponsoring club a port the project as outlined in this appeligible by the District as described and Conditions and will abide by all stairly, and hold harmless Rotary International committee members (Cod or expenses, including without limit tresult or arise directly or indirectly, but notice upon the failure of the spote final report with complete financiar in which the project was started. Cod accept the terms of this Agreement	after project completion and colication. Funds provided by the in The Rotary Foundation (TRF) DSG tipulations set forth therein, national (RI), The Rotary Foundation collectively RI/TRF/District) from any tation reasonable attorney's fees and the implementation of this consors to abide by the terms set all accounting within 60 days of the G. All applicable laws of the State
Name of Club President			
Make Check Payable To			
Mail Check To			
	controlled account. Payment cann vill be sent after the projects is		

Date





#### **District Grant Checklist**

	Have you completed all of the sections in the District Grant application?						
	Have you identified the primary activity?						
	Does the project budget in US Dollars match the project financing in US dollars?						
	Do you have a cooperating organization? If so, do you have a letter signed by someone authorized to commit the organization describing the work that will be performed and their agreement to support audits as requested?						
	Have you attached any cash contribution forms?						
	Have you attached any DDF transfer forms?						
	If you are including funds from sources other than Rotary Clubs in District 5240, do you have documentation confirming their contribution?						
	Do you have your committee of three people? Note that one of the three must be a member of your board of directors. No one who might benefit from funds made available from this grant can be on your project committee.						
	Have you listed the payment information? Payment will only be made to an account controlled by your Rotary Club.						
	Have you budgeted funds within your own club for this project?						
	Has your president-elect (President in Rotary Year 2019-20) signed the application?						
District 52	is form and all attachment 240 Grants Chair antapplication@district524	40.org					
FOR DIST	TRICT GRANTS SUBCOM	MITTEE USE ONLY					
Project N	umber Assigned						
Date App	lication Received						
The 2019-2020 District 5240 District Grants Committee recommends approval in the amount of							
District G	rants Subcommittee Chair			Date			
Final Rep	oort Approved			Date			
Check #		Amount		Date			
Check Ma	ailed To:						