

DISTRICT 5240 CHARITABLE FOUNDATION
PUBLIC IMAGE GRANT APPLICATION

Please complete all sections of this application. Groups may use this form and attach additional pages as needed or may answer the questions below on blank paper. Please be sure the answers follow the same order as the application. Incomplete applications will be returned. Applications are accepted after July 1 and before June 30 of the applicable Rotary fiscal year and will be awarded one to a group. The application must be approved prior to incurring reimbursable expenses.

Questions can be sent via email to dcfgrants@district5240.org

PROJECT TITLE

SPONSORING DISTRICT 5240 GROUP:

PROJECT LOCATION

PROJECT DATES

PROJECT OBJECTIVES

What is the purpose of the Public Image project? What do you hope to accomplish? How will you measure impact and success?

PROJECT ACTIVITIES

Describe the activities that will be funded by the grant.

PAYMENT DETAILS

Grant funds will be sent to the Rotary-sponsored 501(c)(3) organization listed below.

Make check payable to:

Tax ID Number:

Point of Contact Name:

Point of Contact Title:

Point of Contact Email Address:

Point of Contact Phone:

AGREEMENT

This Application and Agreement are entered into between the Rotary Clubs in the sponsoring Rotary and represented by the District 5240 Group Assistant Governor and the District 5240 Charitable Foundation. In applying for and accepting project funding, the project sponsoring Clubs agrees:

1. To utilize the grant funds in support of the project as outlined in this application. Funds provided by the DCF will not be used for any purposes other than those considered eligible by the DCF as described in the grant Terms and Conditions.
2. To complete the project by the end of the Rotary Year in which the project is approved. Any funds not expended by the end of the Rotary Year will be returned to the DCF.
3. To complete the project in the geographic area represented by the Group unless an exception has been granted by the DCF
4. To defend, indemnify, and hold harmless Rotary International (RI), TRF, District 5240, District 5240 Charitable Foundation, their respective Directors, Trustees, Officers, employees, and committee members (Collectively RI/TRF/District/DCF) from any and all damages, losses, judgments, costs, fines, awards, liabilities, and or expenses, including without limitation reasonable attorney's fees and costs of litigation, asserted or recovered from RI/TRF/District/DCF, that result or arise directly or indirectly, from the implementation of this project.
5. That this agreement may be cancelled for any reason without notice upon the failure of the sponsors to abide by the terms set forth herein. The sponsors agree to return total funds granted if funds are misused.
6. Reporting. The Project Sponsoring Club is required to submit the final report to the DCF. The Final Report is due within 90 days of completion of the project. Failure to submit the final report on time will result in return of grant funds to the DCF
7. All applicable laws of the State of California, USA, govern this Agreement.

By signing below, I certify that the Rotary Clubs in the sponsoring Group acknowledge and accept the terms of this Agreement and agree to abide by the stipulations set forth therein.

Project Sponsoring Rotary Group _____

Group Assistant Governor (Print) _____ Phone _____

Signature _____ Date _____

Checks will normally be distributed within 30 days of approval of the grant application.
Payment cannot be made to an individual, cooperating organization or beneficiary.

Please retain a copy of this application for your files, and send the original to the District 5240 Charitable Foundation Grants Committee Chair via email at dcfgrants@district5240.org .

(-----DO NOT WRITE BELOW THIS LINE GRANTS COMMITTEE USE ONLY-----)

District 5240 Grants Committee recommends approval for \$_____.

Project Number Assigned _____

Approved by District Grants Committee Chair _____ Date _____

Approved by District Charitable Foundation _____ Date _____

Check Written by District Rotary Foundation Chair _____

Check # _____ in the amount of \$ _____ Date: _____