



# D5910 District Grant Application 2021-2022

*Complete and return to:*

**Bobby Chapman**  
**District Grants Chair**  
**409-351-9106**

**EMAIL signed copy to:**  
**bobbychapman.5910@gmail.com**  
**by August 1, 2021**

**District Grant #** \_\_\_\_\_ **Individual Project Report #** \_\_\_\_\_

Rotary Club: \_\_\_\_\_

Our club is currently qualified under rules for Rotary District Grants. \_\_\_\_ Yes \_\_\_\_ No

Name of member(s) who attended Qualifications Training: \_\_\_\_\_

## **Project Description**

1. Briefly describe the project. What will be done, when and where will project activities take place, and who are the beneficiaries? Outline your spending and publicity plan.

2. How many Rotarians will participate in the project? \_\_\_\_\_

3. What will they do? Please give at least two examples. \_\_\_\_\_

4. How many non-Rotarians will benefit from the project? \_\_\_\_\_

5. What are the expected long-term community impacts of the project?

6. If a cooperating organization is involved, what will be its role?

## **Financial Report** (Club must retain receipts of all expenditures) **NOTE: Total Project Income must match Project Expenditures**

7. Income	Amount
1. District Grant funds to be received from the District	
2. Rotary Club Funds	
3. Other Funding	
<b>Total Project Income</b>	

*\*Note: Rotary Club Funds must equal or exceed District Grant Funds*

8. Expenditures (please be specific and add lines as needed)

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
<b>Total Project Expenditures</b>	

\* *Total Project Income minus Total Project Expenditures must equal \$0.00:*

9. **Presidents:** By signing this report, I confirm that to the best of my knowledge these District Grant funds will be spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate. Receipts for all grant-funded expenditures will be provided to the District.

In addition, I confirm that this grant application has been approved by the Board of Directors of the club.

President's Signature \_\_\_\_\_ Date: \_\_\_\_\_

President's Name (please print): \_\_\_\_\_

President's Contact Information:

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Rotary Club: \_\_\_\_\_

**Rotary Club Contact Information:**

Project Contact: Two Rotarians (one may be the President) must be listed who will provide oversight and management of the project funds for the entire duration of the project, even if it continues into another Rotary year.

**Primary Contact**

Name: \_\_\_\_\_

Rotary Position/Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home \_\_\_\_\_

Office: \_\_\_\_\_

Cell: \_\_\_\_\_

**Secondary Contact**

Name: \_\_\_\_\_

Rotary Position/Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home \_\_\_\_\_

Office: \_\_\_\_\_

Cell: \_\_\_\_\_