## Email or Mail Application to Claude LaLiberté, District Grants Chair rotaryd7850foundation@gmail.com or 42 Silver Cir, Barre, VT 05641

**2023-24 ROTARY DISTRICT 7850 DISTRICT GRANT**

***Application Form Grant Application Deadline – 28 April 2023***

Date:

ROTARY CLUB of

Mailing Address of Rotary Club:

**AMOUNT REQUESTED (maximum $4,000)– USD $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Amount Club will match USD$ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: a match is required for any grant >US $1,001

**Please describe the project**:

**How will it meet the needs of the community?**

**What, specifically, will the grant money be used for?**

Did your Club receive a grant in 2022-23? Yes \_\_\_ No \_\_\_

**What was the average donation to the Rotary Foundation/Member in 2020-21?**

**What is your current donation goal/member for 2022-23?** US$

**Please describe your club’s involvement in the project:**

**How long will the project take to complete?**

**What are potential pitfalls that could delay completion**?

**Please show us a detailed expected timeline for the project.**

**How will your club promote this project in the local media?**

**If there is not enough Grant money for this year, could you do your project with less than what you have asked for?**

**Could you delay implementation for a year?**

**Attach a copy of the budget for the project.**

**CONTACT INFO FOR MINIMUM OF 3 CLUB MEMBERS WHO WILL OVERSEE THIS GRANT:** (please print names in the order they should be contacted by the DISTRICT GRANT committee with questions)

Name:

Address:

Preferred Phone Number:

E-mail Address:

Name:

Address:

Preferred Phone Number:

E-mail Address:

Name:

Address:

Preferred Phone Number:

E-mail Address:

As the designated members of The Rotary Club of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, we promise to be stewards in good faith of this Grant money, understanding it comes 100% from the donations to the Rotary Foundation of District 7850 members three years ago.

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

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

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

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

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

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

**Budget:**