****

**ROTARY INTERNATIONAL DISTRICT 6780**

**DISTRICT GRANT APPLICATION
 SINGLE CLUB PROJECT
 FOR ROTARY YEAR 2020-21
(Applications due by January 31, 2020)**

****

**Ensure that your club’s Qualification Plan and MOU are completed and approved.**

***We can’t approve your grant unless your club is qualified.***

**Have questions? Try the Grant Timeline or the Grant Info and Instructions, located on the district website.**

 ***Application must be typewritten. Type in the boxes and they will expand as you type.
 If additional space is needed, you may include an attachment.***

1. PROJECT SPONSOR: The Rotary Club of      \_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. PROJECT FUNDING:

 A. Amount of requested District Grant funds: $      \_\_\_\_\_\_

 (minimum of $500, maximum of $5,000)

 B. Amount of your club’s matching funds: $     \_\_\_\_\_\_\_

 (must equal or exceed requested grant)

C. Funds from other sources, if any: $     \_\_\_\_\_\_\_

Total project cost (A + B + C): $     \_\_\_\_\_\_\_ (Must match budget on pg. 4)

3. PROJECT DESCRIPTION: (Boxes expand if typing on a computer. Use additional sheets as necessary.) Remember the committee is not familiar with the project. Describe all aspects of the project to give a clear understanding of the project’s objective.

1. Project Name (2-4 words):
2. Humanitarian Need filled by this project:

Check the TRF Focus Areas/ humanitarian need that best fits your project:
      **Peace and Conflict Resolution**      **Disease Prevention and Treatment**       **Water and Sanitation**       **Maternal and Child Health**       **Basic Education and Literacy**      **Economic and Community Development**      **Other:**

1. Project Goal and measurable objectives:
2. Project location or address. If there is a website for your project or location, include it here.

1. Need for the project. Describe in detail the need for the project and how you identified the need. What is the current situation?

1. Who will the project impact? Describe the target group for the project. Include the estimated number of people affected by the project.

g. Describe in a step by step fashion how the project will be conducted. Who will do what and when??

1. Project Outcomes and Impact - Describe how the project will benefit the community and/or improve the lives of those impacted by the project:

1. Project Financial Control – Describe how you can demonstrate that Rotary funds are being properly spent. Examples: 1) have a committee for the project that does not include personnel related to the beneficiary or the cooperating organization. 2) Get competitive bids for major items to show that they are reasonably priced.

1. Sustainability – Will you install equipment that requires maintenance? Is the project an ongoing activity that requires ongoing funding? Describe how the benefits of the project will be sustained. This may include maintenance by a Rotary Club or a cooperating organization, or continued funding by a Rotary club or others, or a search for ongoing funding.

4. TIMELINE: Project start date:      \_\_\_\_\_ Estimated expenditure of funds date \_     \_\_\_\_\_\_\_ Estimated project completion date:      \_\_\_\_\_

(Projects must begin after funding is approved and be completed May 31, 2021.)

5. NON-FINANCIAL ROTARIAN INVOLVEMENT – Other than providing funding, how will your club’s Rotarians actively participate in the project? List more than one role. (See examples in **DG checklist**.)

6. PUBLICITY - How will you ensure that the general public knows this is a Rotary project? Provide details on how you will publicize this project.

7. RESPONSIBLE ROTARIANS: List the two Rotarians from your club that will be responsible for project oversight, funds management and successful completion. The Primary contact will ensure that all reports, budget receipts and documentation are submitted to the DG committee.

Primary contact name :

Rotary title/position:

Street address :

City:       Zip:

Telephone:       Fax:       E-mail:

Secondary contact name :

Rotary title/position:

Street address :

City:       Zip:

Telephone:       Fax:       E-mail:

8. COOPERATING ORGANIZATIONS – If the project involves a cooperating organization(s), provide the name of the organization and provide a brief description of the role of the organization. Attach a letter from them specifically stating their responsibilities and how Rotarians will interact with the organization. By signing this application, the Rotarian sponsors endorse the organization as reputable, reliable and responsible. Name(s) and role(s) of cooperating organization(s) are:

9. BUDGET: Provide below, or attached, a complete, detailed and itemized budget for the entire project. Indicate what items DG funds will be used to purchase. (Please review the list of ineligible items in the guidelines first.)

Please note that items cost need not necessarily be split evenly between DG and club funds. A copy of the Humanitarian Grants Program Eligibility Guidelines is attached.

The budget should be in the form:

Item Name Amount DSG Funds Club Funds Other Funds

 TOTAL BUDGET: $      \_\_

 (Must match funding total from first page)

10. REPORTS AND AUTHORIZATION :

A progress report is required on October 1, 2020 and a final report is required when the project is completed or no later than May 31, 2021.

Funds will not be released unless these reports have been filed with the Humanitarian Grants Committee.

**A receipt for ALL items purchased** for the project must accompany the final report.

11. Has the **Completion Checklist** been completed?

With my signature below, as president or president-elect of the Rotary Club of       , I understand that all Rotary clubs/districts involved in this project are responsible to the Rotary Foundation and District 6780 for the conduct of the project. I further understand that project progress reports are required on October 1, 2020 and that a final report is to be submitted within two months of the project’s completion (May 31, 2021 at the latest). I affirm that the club has voted to undertake this project and that this application is accurate, true and complete to the best of my knowledge.

CLUB PRESIDENT/PRESIDENT-ELECT’S NAME (please print):      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

SIGNATURE / TITLE DATE

Send this completed form to Rotarian David Carroll’s email dcarroll1960@aol.com *And* Pat White’s email pkmsw@aol.com ***Questions?*** Contact Rotarian Carroll via email or call him at (423) 595-3503 (Cell), or Pat via email or call (865) 236-2072 (Cell).

Funding Made Possible through 2017-2018 Gifts made to the Annual Fund by District 6780 Rotarians

