**Rotary Club of Pensacola**

**Community Grant Guidelines**

**2017**

1. Recipients should be charitable 501(c)3 organizations. In general, this excludes individuals, even those who find themselves in a difficult financial situation or who individually seek to do good works. For individuals who wish to engage in independent charitable work, we request that they partner with an established charitable organization.

2. A Rotary Grant Request will only be considered if all documentation is complete and submitted by the required deadline.

3. Grants are not automatically renewed or reconsidered each fiscal year. An application must be submitted within each fiscal year for which a grant is needed. The Rotary fiscal year is July 1 to June 30.

4. Typically, Rotary is interested in supporting targeted projects that address: peace and conflict prevention/resolution, disease prevention and treatment, water and sanitation, maternal and child health, basic education and literacy, or economic and community development.

5. Recipients will be expected to issue a follow-up report regarding the effect of Rotary’s grant. This should include receipts, photographs, testimonials, numbers served and the overall impact of the dollars received.

6. Recipients are encouraged to acknowledge the Rotary Club of Pensacola in their publicity.

**Application Process and Timeline**

**Grant Process Opens:** Wednesday, February 15, 2017

**Grant Deadline:** Wednesday, March 15, 2017

**Recommendations Submitted to Board**: Friday, April 28, 2017

**Grant Recipients Notified:** May 2017

Email the completed application and all required documentation to Bruce Partington, bpartington@clarkpartington.com, no later than Wednesday, March 15, 2017. All documentation should be sent electronically as PDF files. The name of each file should match the name of required document below, e.g. Completed Application.pdf. If you have any questions, email Bruce Partington.

**Required Documentation**

\_\_\_ Completed Application \_\_\_ Project Budget

\_\_\_ IRS Determination Letter \_\_\_ Organization Budget

**Rotary Club of Pensacola**

**Community Grant Application for Support**

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

Organization Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your organization a 501(c)3? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_ # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EIN # (required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization’s Mission Statement:

Geographic Area Served:

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

Total Project Budget (Attach Documentation Detailing Expenses): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Requested from Rotary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief Summary of the Project (No More Than 500 Words):

Target Population:

Timeline:

If awarded, how would the support from Rotary be used for the project?

How would partial funding impact this project?

Does your project address one of Rotary’s areas of focus?

1. Peace and conflict prevention/resolution Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
2. Disease prevention and treatment Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
3. Water and sanitation Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
4. Maternal and child health Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
5. Basic education and literacy Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
6. Economic and community development Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Please describe how your project addresses applicable area(s) of focus from the list on the previous page. If your project does not address any of the six focus areas above, what additional information should be considered when evaluating your project?

Do any Rotarians serve on your board? If so, please list. \*If you do not know whether your Board members are Rotarians, please attach a copy of your Board roster.

Please list any Downtown Rotarians endorsing your project:

If submitting additional attachments for support, please list them below and provide a brief description.

Should Rotary award a grant, Checks should be made payable to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address for payment should Rotary award a grant:

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Executive Director or Board President:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Executive Director or Board President:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_