**Rotary Club of Pensacola**

**2023 Grant Application**

1. **Organization Information**

1. Name:

2. Mailing Address:

3a. City: 3b. State: FL 3c. Zip:

4. 501(c)3 Number: [***Also provide a copy of the IRS determination letter***.]

5. EIN #:

6a. Application Contact:

6b. Contact’s Email: 6c. Contact’s Phone:

7. Organization’s Mission Statement:

8. Geographic Area Served:

1. **Project Information**

1. Title:

2. Target Population:

3. Timeline:

4. Project Budget (including specific known expenditures):

5. Amount Requested from Rotary (maximum $5,000):

6. Provide a brief Summary of the Project: (Copying and pasting from another document is fine. Please do not exceed 500 words.)

1. **Rotary Involvement**

1. Does the project address one or more of Rotary’s seven focus areas listed below?

* Peace and conflict prevention/resolution Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Disease prevention and treatment Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Water and sanitation Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Maternal and child health Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Basic education and literacy Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Economic and community development Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_
* Environment Yes\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

2. Describe how the project will support the applicable area(s) of Rotary.

3. If the project does not address any of the seven Rotary focus areas above or goes beyond those, what additional information should be considered when evaluating your project?

4. Do any Rotarians serve on your board? If so, please provide their name(s). If you do not know whether your Board members are Rotarians, please provide a list of your Board members.

5. Please list any Rotarians endorsing your project and/or other Rotary Clubs involved in this project:

6. Have you received a grant from our club within the last five years? If so, please identify the years of receipt and the project(s) for which the grant was awarded.

6. Please list any additional documents accompanying this application below and provide a very brief description of each for reference.

1. **Grant Award Payment**

1. Make Check Payable to:

2a. Mailing Address (If different than section A):

2b. Street:

2c. City: 2d. State: FL 2e. Zip:

3. Printed Name of Executive Director or Board President & title:

4. Signature of Executive Director or Board President:

5. Date:

1. **Submittal**

Email the completed application and supporting documentation in PDF format to Randall Richardson at [randall.richardson@rc1.myflorida.com](mailto:randall.richardson@rc1.myflorida.com), 912-690-2664 ***no later than 11:59 pm CST on Friday, March 31, 2023.***

Ensure all required information and documentation is provided as part of the grant application in one submission, including the IRS determination letter item referenced in item A.4.

*NOTE: This is a Word document that can be completed and saved under the appropriate filename as a PDF document format prior to submittal.*