



# ROTARY INTERNATIONAL DISTRICT 6740

## DISTRICT SIMPLIFIED GRANT APPLICATION FOR ROTARY YEAR 2009 – 2010 SINGLE CLUB PROJECT

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

2. PROJECT FUNDING:

A.. Amount of requested DSG grant funds: \$ \_\_\_\_\_  
(minimum of \$500, maximum of \$1,500)

B. Amount of your club's matching funds: \$ \_\_\_\_\_  
(must Half of award)

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

Total project cost (A + B + C): \$ \_\_\_\_\_

3. PROJECT DESCRIPTION: (Boxes expand if typing on a computer. Use additional sheets as necessary.)

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

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

c. What are the project's measurable objectives? What will change and how?

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

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

4. TIMELINE: Project start date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_  
(Projects must begin after funding is approved and be completed by the end of the current Rotary year.)

5. NON-FINANCIAL ROTARIAN INVOLVEMENT – Other than providing funding, how will your club’s Rotarians actively participate in the project?

6. PUBLICITY - How will you ensure that the general public knows this is 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:

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 its 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 DSG 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 DSG and club funds.

The budget should be in the form:

<u>Item Name</u>	<u>Amount</u>	<u>DSG Funds</u>	<u>Club Matching Funds</u>
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	

TOTAL BUDGET: \$ \_\_\_\_\_

11. REPORTS AND AUTHORIZATION :

A progress report is required at 6 months and a final report is required when the project is completed.  
 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.

With my signature below, as president of the Rotary Club of \_\_\_\_\_, I understand that all Rotary clubs/districts involved in this project are responsible to the Rotary Foundation and District 6740 for the conduct of the project. I further understand that project progress reports are required at six month intervals and that a final report is to be submitted within two months of the projects completion. 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’S NAME (please print): \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE

Send this completed form to Rotarian John Adams, 5 Hillandale Place, Somerset, Kentucky 42501-  
 Contact Rotarian Adams via email [jbasomerset@aol.com](mailto:jbasomerset@aol.com) or work (606) 678-4916 or Home (606) 678-4916

**Funding Made Possible through 2006-2007 Gifts made to the Annual Fund by District 6740 Rotarians**