# C:\Users\shurd\Downloads\Rotary International logo (Jan 2015) - Azure+Gold PMS.png Applicant Information

ROTARY CLUB OF LEXINGTON PARK

CHARITABLE GRANT REQUEST APPLICATION

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of Organization/Agency: | | | | | | |
| Date of Request: | | Date Fu | nds are Needed: | |  | |
| Mailing Address: | | | | | | |
| Non-Profit: | Yes / No | EIN: | Website: |  | | |
| Contact Name: | | | | | | |
| Contact Position within the  Organization/Agency: | | | | | | |
| Contact Phone: | | Contact Email: | | | | |
| Has your organization received funds from RCLP in the past 2 years? If yes, please briefly describe how the funds were used | | | | Yes | | No |
|  | | | |  | | |
| *Note: Receiving a grant in the past two years does not automatically disqualify you.* | | | | | | |

# Project Information

|  |  |
| --- | --- |
| Project Title: | |
|  | |
| Project Mission (One sentence): |  |
| Project Start Date: | Project End Date: |
| Geographic Location of Project (select all that apply): | Lexington Park  All of St. Mary’s |
|  |  |

1. **Budget and Matching Funds Information**

Note: Be sure to include the ENTIRE project/program budget, not just the budget for the RCLP grant money. This is where you demonstrate how the RCLP grant funds are leveraged to secure other funds to make the most impact.

## Project Budget (insert lines as needed or attach separate budget document)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item | Unit Cost | Qty. | | Cost |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| **Total Project Budget:**  *(This number should be the same as the total anticipated funding number.*  *If it is not, be sure to explain why.)* | | |  | |

* 1. Project Funding

## Amount Requested from RCLP : $

(Average Grant Amount: >$3,000)

## Other Funding Sources:

(List all other funds – add rows as needed)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Source | Amount | | Committed (yes/no) |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| **Total Anticipated Project Funding:** | | | $ | |

## Optional: Any additional information we should know about the budget?

1. **Summary of Need** *Note: Be sure to clearly and specifically explain the need your program/ project addresses, and how you know that need exists. This is the “why” behind your project/ program.*

## What area(s) does this project/program address? (select all that apply)

Home Insecurity and Homelessness

Nutrition Insecurity

Mental Health for St. Mary’s Youth

b. Describe

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **5. Project Description**  *Note: Someone with little to no knowledge about your organization should read this section and walk away with a clear understanding of exactly what you’re going to do and how you’re going to do it.*   1. Describe the project in 100 words or less including specifically how Rotary funds will be used. |
|  |
| b. What is the project’s intended outcome and how will success be measured? |
|  |
| |  | | --- | | c. Describe how the project will be implemented and how will long-term success be sustained after the grant funds have been spent? | |
|  |
|  |

# Volunteer Component

Note: The volunteer component includes activities directly related to the program or project. These are things specifically related to the completion of the project or program (i.e., Rotarians serving on the organization’s board of directors or otherwise involved with the overall organization does not satisfy the volunteer element).

|  |  |
| --- | --- |
| a. Will the project include a volunteer component inviting participation by Rotary Club members? | Yes No |
| b. If yes, describe the volunteer project opportunity including the number of volunteers needed, approximate number of hours, approximate timeframe and services needed. | |

|  |
| --- |
|  |

# RCLP Recognition

## Describe how the community will know this is a Rotary Club of Lexington Park

sponsored project, (e.g., publicity in local news media outlets or social media, public launch, open house, or dedication, display of the Rotary wheel, etc.)?

|  |
| --- |
|  |