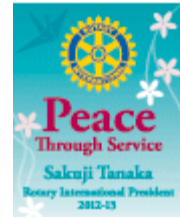




**ROTARY INTERNATIONAL DISTRICT 6780
DISTRICT SIMPLIFIED GRANT APPLICATION
FOR ROTARY YEAR 2012 – 2013
MULTIPLE CLUB PROJECT**



PRINT OR TYPE ALL INFORMATION. USE ADDITIONAL SHEETS OF PAPER AS NECESSARY
This form must be typewritten. Type in the boxes and they will expand as you type.

1. **PROJECT SPONSOR LEAD CLUB:** The Rotary Club of _____

ADDITIONAL PARTICIPATING CLUBS:

Club #2 _____

Club #3 _____

Club #4 _____

Club #5 _____

2. **PROJECT FUNDING:**

A.. Amount of requested DSG grant funds: \$ _____
(minimum of \$500, maximum of \$2500 per club)

B. Amount of Lead Club's matching funds: \$ _____

Amount of Club #2's matching funds: \$ _____

Amount of Club #3's matching funds: \$ _____

Amount of Club #4's matching funds: \$ _____

Amount of Club #5's matching funds: \$ _____

Total matching funds must equal or exceed requested DSG grant

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

Total project cost (A + B + C): \$ _____ (Must match budget)

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

a. Project Name (2-4 words):

b. Humanitarian Need filled by this project:

Address one of these TRF Focus areas or another humanitarian need: **Peace and Conflict Resolution; Disease Prevention and Treatment; Water and Sanitation; Maternal and Child Health, Basic Education and Literacy; Economic and Community Development**

c. Project Goal and measurable objectives:

d. Project location or address. If there is a website for your project or location, include it here.

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

- f. 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??

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

- i. Describe the role of EACH of the participating Rotary clubs in the project.

- j. 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.

- k. 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 completion date: _____

(Projects must begin after funding is approved and be completed by March 2013.)

5. NON-FINANCIAL ROTARIAN INVOLVEMENT – Other than providing funding, how will your clubs' Rotarians actively participate in the project? List more than one role. (See examples in the DSG 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 Rotarians from your clubs 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 DSG committee.

Lead Club Primary contact name:

Rotary title/position:

Street address :

City: Zip:

Telephone: Fax: E-mail:

Lead Club Secondary contact name:

Rotary title/position:

Street address :

City: Zip:

Telephone: Fax: E-mail:

Club #2 contact name:

Rotary title/position:

Street address :

City: Zip:

Telephone: Fax: E-mail:

Club #3 contact name:

Rotary title/position:

Street address :

City: Zip:

Telephone: Fax: E-mail:

Club #4 contact name:

Rotary title/position:

Street address :

City: Zip:

Telephone: Fax: E-mail:

Club #5 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:



Humanitarian Grants Program Eligibility Guidelines

ELIGIBLE	INELIGIBLE
Revolving loans/microcredit	Establishment of a foundation, permanent trust, or long-term interest-bearing account
Short-term rent or lease of buildings	Purchase of land or buildings
Construction of infrastructure such as service roads, wells, reservoirs, dams, bridges, latrines, toilet blocks, water supplies, and other similar structures	Construction or renovation of any structure in which individuals live, work, or engage in any gainful activity. This includes buildings, containers, mobile homes, or structures where individuals carry out any type of activity such as manufacturing, processing, maintenance, or storage, including provision of new services or upgrade of facilities
Purchase of equipment or appliances	Provision of plumbing or electrification inside buildings
Short-term and/or contracted labor for project implementation	Salaries for individuals working for another organization
Administrative expenses for project activities	Operating or administrative expenses of another organization
Primary and secondary education, tuition, transportation	Postsecondary education activities, research, or personal or professional development
Domestic travel	International travel (except Volunteer Service and 3-H Grants)
Detailed, itemized expenses	Contingencies, miscellaneous expenses
Assistance to land mine victims	Land mine removal
Publicity expenses such as newspaper fees, or printing of posters, brochures, or fliers to inform the community of an available service	Rotary signage
Vaccines and immunizations, if the project is consistent with the criteria, procedures, and policies of the PolioPlus program and World Health Organization	Transportation of vaccines or immunizations by hand over national borders
New Rotary-sponsored projects not already in progress or completed	Projects already undertaken and in progress, existing projects, activities primarily sponsored by a non-Rotary organization, or projects already completed
Maternal and prenatal health and education	Purchase and distribution of birth control devices and ultrasound equipment for use in sex determination
Budgeted and itemized humanitarian goods	Unspecified or cash donations to beneficiaries or cooperating organizations
Humanitarian or service activities benefiting a community in need	Fundraising activities, expenses related to Rotary events such as district conferences or anniversary celebrations or entertainment activities that do not include a humanitarian aspect
Secular, nonreligious activities that benefit a community in need	Projects that support purely religious functions at churches and other places of worship

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 Funds</u>	<u>Other Funds</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL BUDGET: \$ _____
(Must match funding total)

10. REPORTS AND AUTHORIZATION :

A progress report is required on October 1, 2012 and a final report is required when the project is completed or no later than April 15, 2013.

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/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 a project progress report is required on October 1, 2012 and that a final report is to be submitted within two months of the project completion (April 15 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.

LEAD CLUB PRESIDENT/PRESIDENT ELECT’S NAME (please print): _____

SIGNATURE /TITLE DATE

ASSISTANT GOVERNOR FOR PARTICPATING CLUBS (please print): _____

(The Assistant Governor’s signature is required on all Multiple Club applications.)

SIGNATURE DATE

Send this completed form to Rotarian Jim Roxlo, 400 South Crest Road, Chattanooga, TN 37404, fax to 423-875-7308 or email it to him at Jim@Roxlo.com. Questions? Contact Rotarian Roxlo via email or call him at (423) 875-7031 (Work), 423-624-3603 (Home)

Funding Made Possible through 2009-2010 Gifts made to the Annual Fund by District 6780 Rotarians