

GRANT APPLICATION FORM

Date of Application: _____ Amount Requested: _____

Money Needed By: _____ Completion Date: _____

Name of Organization: _____

Mailing Address: _____

City/State/Zip: _____

Contact Person: _____ Phone: _____

Sponsoring Rotarian: _____

Is the organization recognized by the IRS as a 501(c)(3)? Yes _____ No _____

Please provide IRS entity type: _____

Please describe the program for which funds are requested, including total estimated cost and how the organization will meet that cost; involvement by the organization itself and its volunteers, etc. Feel free to attach any information to help us better understand your program.

See attached for more information about the Newport Rotary and the Grant Application process.

Applicant's signature: _____