



Hudson Daybreak Rotary Grant Application Form

We are pleased to receive your request for funds. Rotary is an international service organization which sponsors programs and projects in almost every country in the world. Our Club's motto "Enhancing Opportunities for Youth, Creating a Better Community for All" reflects the Hudson Daybreak Rotary Club's commitment to local community projects and programs.

Grants are awarded twice a year with application submission deadlines of April 1 and October 1

Please return this form to a member of the Daybreak Rotary Club or mail to: P.O. Box 48, Hudson, WI 54016

Organization's Information (Please attach brochures or additional information)

Name: _____ Website: _____
 Phone Number: _____ Alternate Phone Number: _____
 Email: _____ Address: _____
 Tax Status: _____ Registered with State? Yes No Date Organization Founded: _____
 Communities Served: _____
 # of Staff: _____ # of Volunteers: _____ # of Rotarians involved in your Org: _____
 Names and how Rotarians are involved: _____
 Is your Organization willing to participate in Daybreak Rotary fundraising events? Yes No
 Fiscal Year: _____ Annual Revenue: _____ % of Annual Funds used for Administration: _____
 Please list other organizations from which you receive financial support: _____

Contact Information

Name: _____
 Phone Number: _____
 Alt. Phone Number: _____
 Email: _____
 Address: _____

Presenter's Information (if different)

Name: _____
 Phone Number: _____
 Alt. Phone Number: _____
 Email: _____
 Address: _____

Funds Request Information

Amount Requested: _____ When are Funds Needed: _____
 Is this a: One Time Request Annual/Repeating Request Date Program Founded: _____
 Specify what the requested funds would be used for: _____
 _____ (attach additional pages as needed)
 Describe: Who, How, and How Many will benefit from these funds: _____
 _____ (attach additional pages as needed)

Review and Approval Procedures

Date Request Received: _____
 Finance and Grant Committee Review Date: _____ Recommendation Date: _____
 Chairperson's Initials: _____ Recommendation: Approved Denied Other
 Comments: _____
 Recommended Presentation to the Club: Yes No Date: _____
 Board of Directors Review Date: _____ President's Initials: _____ Action Taken: Approved Denied Other
 Comments: _____

Grant Delivery Procedures

Presentation Date: _____ Location: _____ (photo opp.)
 Rotarians Present: _____ Organization Representatives to be Present: _____