

**MOUNT VERNON ROTARY FOUNDATION  
GRANT APPLICATION**

Check one:  Small Grant (\$1,000 or less)  Major Grant (more than \$1,000)

**INSTRUCTIONS**

This application is available in Adobe Acrobat® PDF format, compatible with both Macintosh and PC computers. The form may be printed out and completed on a conventional typewriter, or be electronically completed on your computer. The PDF format allows you to tab between fields to keyboard information, and to check appropriate boxes with your spacebar or mouse. Please do not exceed the space provided for each response, or otherwise cause the application to exceed two pages in length. Please print out and mail, or hand-deliver, one copy of your completed application and attachments to the address below. Please be sure all required information and attachments are submitted. Incomplete applications will be returned.

**RETURN APPLICATION AND ATTACHMENTS TO: MOUNT VERNON  
ROTARY FOUNDATION, P.O. BOX 1207, MOUNT VERNON, OH 43050.**

**SECTION 1: ORGANIZATION INFORMATION**

Organization Name: \_\_\_\_\_

Street Address/P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact person for this grant application: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Are you a 501(c)(3) non-profit organization, or otherwise tax-exempt? \_\_\_\_\_

If "No," what qualifying organization will serve as fiscal agent for the project?

\_\_\_\_\_

**SECTION 2: PROJECT INFORMATION**

Project title: \_\_\_\_\_

Project description: \_\_\_\_\_

Grant amount requested: \$ \_\_\_\_\_

Date funds needed: \_\_\_\_\_

**SECTION 3: ATTACHMENTS FOR MAJOR GRANT APPLICANTS ONLY**

*(Please check box for each item you have included with this application)*

Most recent fiscal year financial report and current year annual budget. *(Required.)*

List of officers and board members, including contact addresses and phone numbers. *(Required.)*

Copy of treasury letter certifying your 501(c)(3) tax-exempt status (or that of your fiscal agent). *(Required.)*

Explanation of plans to inform the community about your project, and to recognize contributors. *(Required.)*

Descriptive brochure of your organization, case statement, or other supporting materials. *(Optional.)*

A letter of recommendation from an individual not affiliated with your organization. *(Optional.)*

*The undersigned attest that all the information submitted herewith is accurate to the best of their knowledge.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Organization CEO: \_\_\_\_\_  
(if different)