



The Rotary Club of West Jacksonville

Charity Grant Application

Name of Organization _____

Address _____

Phone _____

501©3 Tax I.D. No.: _____

Contact Person _____

Total Annual Budget of Organization last Fiscal Year _____

Mission of the Organization _____

Describe the primary sources of your organizations funding _____

Dollar Amount Requested for Project _____

Describe Nature of Project (attach additional information as necessary)

Describe (if any) volunteer opportunities with your organization for our Rotary Club members.

Has your organization ever received a grant from West Jacksonville Rotary? (if yes, when?)

Attach a copy of :

1. Project Budget and Time Line for completion.
2. Copy of Treasury Ruling Granting 501(c)3 status.
3. List of Board of Director.
4. Executive Director's name and phone number.
5. Most recent audited annual financial.

I Certify that the aforementioned and enclosed information is complete and accurate.

TYPED NAME

TITLE

SIGNATURE

DATE