



# Community Engagement Grant APPLICATION

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

Does the organization have tax-exempt status under I.R.S. 501(c)(3)? \_\_\_\_\_

Organization's Address: \_\_\_\_\_

Name of Executive Director or CEO: \_\_\_\_\_

Contact Name and Title: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Requested Grant Amount\*: \$ \_\_\_\_\_

*\*Only in exceptional circumstances will requests for grants in excess of \$2,500 be considered.*



While not mandatory, does the proposed project, campaign or event complement one or more of the (above) seven Rotary focus areas (see [rotary.org/en/our-causes](http://rotary.org/en/our-causes))? If so, which ones?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your organization currently receive assistance (volunteer or financial) from Rotary at the club or district level? \_\_\_\_\_

If yes, describe the assistance your organization receives from Rotary and involvement with your organization by members of Rotary:

\_\_\_\_\_  
\_\_\_\_\_

Are there opportunities for Rotary membership engagement and collaboration with your organization in general and the event or program for which the grant is made in particular? If yes, please describe those opportunities:

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Is the person making the request a Rotarian? If so, which club? \_\_\_\_\_

What is your organization's mission and who does it help or support?

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How will the funds be used and how will they assist in achieving your organization's mission?

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What will the Rotary Club of Charlotte receive in exchange for awarding the requested funds (e.g. tickets, volunteer opportunities, recognition on website/signage, speaking opportunities)?

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If this request is for an event please answer:

1. Is this a first-time or annual event? \_\_\_\_\_
2. What is the budget for this event? \_\_\_\_\_
3. What is the expected attendance (or) overall impact? \_\_\_\_\_
4. Does your organization have customary insurance coverage for claims that may be made in respect of the event? \_\_\_\_\_

How will these funds help promote or relate to the Rotary mission (see [rotary.org/en/our-causes](http://rotary.org/en/our-causes))?

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Are you willing to provide a summary on the impact of the grant and/or complete our evaluation form both in respect of advancing your organization's mission and providing engagement opportunities with your organization to the Rotary Club of Charlotte and its members?

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Include the following:

- 1) A specific project budget for the subject of your application
- 2) An overall organizational budget that shows sources of revenue for your organization.
- 3) A letter of recommendation from a member of the Rotary Club of Charlotte
- 4) One additional signature from a club member endorsing the grant request

By what date are the requested funds needed? \_\_\_\_\_

\_\_\_\_\_  
*Signature of Organization's CEO/ED*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name*

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Names and signatures of Members of the Rotary Club of Charlotte supporting this grant request:

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Signature*

Please return this completed form as well as the required documents to:

Christine Cipriano, Executive Secretary, Rotary Club of Charlotte,  
christine@charlotterotary.org or 1850 East 3rd Street, Suite 220, Charlotte, NC 28204