



## The Rotary Club of Clearwater

P.O. Box 822 • Clearwater, Florida 33757

[www.clearwaterrotary.org](http://www.clearwaterrotary.org)

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**Kent Watts**

**Yehudy Diaz**

**Micah Maxwell**

**Alice Young**

Charities Selection Committee

**Chair: BILL LAYMAN (727) 446-8005**

**JASON STIFF (727) 467-9276**

**KENT WATTS (727) 224-7598**

**JENNIE YATES (727) 216-3216**

**YEHUDY DIAZ (813) 785-9302**

**JOHN WOODRUFF (727) 464-3500**

**TOM WAGNER (813) 207-2117**

Thank you for requesting a Rotary Club of Clearwater Charity Grant application. For the past 84 years The Rotary Club of Clearwater has been devoted to supporting local charities and improving the quality of life in our community.

Our primary fundraiser for the past 18 years has been the Rotary Kingfish Tournament. This year's event will be held in April 2012.

We invite your organization to apply for our charity grants as well as support and promote our Kingfish Tournament in April 2012. We will be judging all of our grant applications based on the following criteria:

1. Is a defined community need addressed?
2. Is the funding request for a capital project, equipment or program?
3. Can The Rotary Club of Clearwater have an impact on solving this need?
4. Have you previously been funded by the Rotary Club of Clearwater? (Funding is limited to three (3) consecutive years to any one recipient agency).
4. Can your organization provide volunteers to assist with the fishing tournament?

*The Rotary Club of Clearwater does not provide funds for salaries or operating expenses. We fund programs that meet specific community needs, equipment and capital campaigns.*

This application is due by **Friday October 14, 2011**. We will be selecting our charity partners and promoting our event throughout the spring of 2012. Grant awards are made to the charities selected during a June 2012 Rotary meeting.

We look forward to receiving your completed application.

Please submit complete applications to:

Fax: 727.446.8002,

Scan and Email(PREFERRED): [drbill@suortho.com](mailto:drbill@suortho.com)

Mail to: *The Rotary Club of Clearwater, ATTN: CSC 2011, P.O. Box 822, Clearwater FL 33757*

Please feel free to contact any member of the Rotary Charities Selection Committee if you have any additional questions.

Sincerely,  
The Rotary Club of Clearwater

Bill Layman  
Chairman - Charities Selection Committee  
727.452.6242  
[drbill@suortho.com](mailto:drbill@suortho.com)

**THE ROTARY CLUB OF  
CLEARWATER  
CHARITY GRANT APPLICATION**

APPLICATION DEADLINE: **FRIDAY, OCTOBER 14, 2011**

TO: The Rotary Club of Clearwater Charities Committee

DATE: \_\_\_\_\_

Please consider support of (please indicate the legal name of the organization):

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_  
Street City State Zip

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Indicate below the purpose/goal of this organization and reasons the organization should receive a portion of the fund raising efforts of our club this Rotary year:

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

ANTICIPATED COST OF PROJECT: \$ \_\_\_\_\_ REQUESTED AMOUNT: \$ \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

Number of individuals impacted by this program: \_\_\_\_\_

With this application, you must enclose:

- a) \_\_\_ Financial Statement
- b) \_\_\_ Copy of IRS 501(c)(3) Determination
- c) \_\_\_ Additional support materials deemed appropriate
- d) \_\_\_ 9 copies of completed application packet

Problem or need addressed by this program: \_\_\_\_\_

Goal statement relating to the problem or need: \_\_\_\_\_

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Specific objectives to be achieved:

1: \_\_\_\_\_

2: \_\_\_\_\_

Actions to be taken:

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Objectives & Methods (use separate sheet, if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Resource needs (i.e., funds, equipment, personnel) to fully implement this program:

NEED

SOURCE (\*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Those resources which will be purchased or otherwise obtained with this grant application should be designated "Rotary Club". All other resources necessary for the implementation of this project should be clearly specified with sources (i.e., other grants, current staff, corporate support) noted.

Expected Outcome of Project (How will this project impact problem or need originally identified?):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Evaluation Plan for each Objective:

PLAN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLAN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If we are unable to fund your entire request, what impact will that have on your project?

\_\_\_\_\_

\_\_\_\_\_

**VOLUNTEER SIGN UP:**

The Fishing for Charities Tournament requires a large number of volunteers for organization, event set up, auction, check in, tear down, participants, sponsorships, ticket sales and many other functions needed in advance of the tournament and on the tournament day. Please indicate how many volunteers your organization can provide and what areas your volunteers can assist in.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VOLUNTEER CONTACT:** Please indicate the name and contact information for the individual at your organization who will be responsible for coordinating your volunteers:

NAME (*Print*): \_\_\_\_\_ PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CERTIFICATION:** We hereby certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge. (Individual signing below must be authorized by the organization to so certify on its behalf):

NAME (*Typed*): \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_ TELE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

RECOMMENDED BY ROTARIAN (NAME): \_\_\_\_\_

Should this organization be approved for support from The Rotary Club of Clearwater, they can **in no way** be guaranteed a definite dollar amount as we cannot project the net amount that our fundraisers will raise. Organization(s) approved will be notified of their approval and the approximate percentage to be awarded from the net amount raised through our fundraising activities.

**APPLICATION DEADLINE: Friday, October 14, 2011**

*Applications may be mailed to The Rotary Club of Clearwater, ATTN: CSC 2011, P.O. Box 822, Clearwater FL 33757 or faxed to 727.446.8002, ATTN Bill Layman.*

*PREFERRED METHOD is to scan and email to [drbill@suortho.com](mailto:drbill@suortho.com)*

*Applications should be **received** by Rotary by midnight of the listed deadline.*

**Reminder: The Rotary Club of Clearwater does not provide grant funds for salaries or operating expenses.**