

## Application Form "A"

The completion and submission of this form does not guarantee that the beneficiary will receive benefits, or the amount of benefits requested. Each application is considered on its merits in conjunction with the philosophy of Rotary International and The Old Saybrook Rotary Club Foundation. Rotary Club decisions are reached after weighing a multitude of factors including, but not limited to, budgetary constraints.

(To be completed by those who will not be a direct beneficiary of the proposed grant)

Purpose of Grant- Why is funding needed? Who will benefit and how?

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Name of Program or Individual Beneficiary \_\_\_\_\_

Do you certify that beneficiaries of this grant qualify as needy? \_\_\_\_\_

If so, what criteria do you use (such as Temporary Family Assistance, family receiving food stamps or free or reduced lunch programs)?

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Time Period of Requested Grant: Start \_\_\_\_\_ Finish \_\_\_\_\_

How much funding are you requesting from Old Saybrook Rotary Club? \$ \_\_\_\_\_

Will assistance or funding from other sources be required? \_\_\_\_\_

Please identify other sources and amount of funding or assistance requested

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If services or materials are to be used in program, will they be obtained by donation

Or reduced cost? \_\_\_\_\_

Grant funds should be made payable to? \_\_\_\_\_

Does applicant certify that the funds will be used for the purpose requested? \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Title of Applicant \_\_\_\_\_

Phone number of Applicant \_\_\_\_\_ Date submitted \_\_\_\_\_