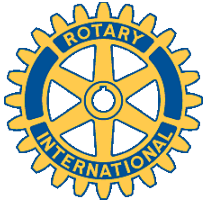


Application For Community Grants



# ROTARY CLUB OF CRESTED BUTTE

**Legal Name of Organization:**

**Address:**

**Authorized Contact Person:**

**Title:**

**Phone:**

**E-mail:**

**Mission or Purpose of Organization:**

**Proposed Use of the Grant Funding:**

**Expected benefits and measures of success:**

**AMOUNT REQUESTED:**

**Total Cost of Project:**

**Numbers Served by Project:**

**Project Duration (with start and end dates):**

Application For Community Grants

**Does the organization have paid staff? Explain.**

**Does the organization receive government funding? Explain.**

**Identify other sources of funds and amounts.**

**If awarded any funding by Rotary, how will you announce, advertise or otherwise publicly recognize Rotary's contribution?**

**Please provide a copy of current operating and/or project budget.**

**I certify that the information provided in this Grant Application is accurate.**

**Signature of Contact Person**

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

**Signature of Board Representative**

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