

DISTRICT 5440
District GRANT APPLICATION
(modified Dec 6, 2013)

Our Mission:

... to enable Rotarians to advance world understanding, goodwill, and peace through the improvement of health, the support of education, and the alleviation of poverty.

(Endorsed by the Council on Legislation, April 2007)

Please print or type all information

1. ROTARY CLUB of Rock Springs, Wyoming

2. Briefly describe the project, its location, and its objectives.

This proposed literacy project is that the Rock Springs Rotary club wants to complete the Literacy project started in Jan 2015. At that time 550 packets were delivered to every mother of a new born at Memorial Hospital of Sweetwater County. These packet consisted of baby T-shirts printed with "Read to me" and the ROTARY LOGO, and the local rotary club name to each and a booklet titled "Every Child Ready to Read" which is like a guide book for the parents in helping their child to get a head start on its learning in life up to the fifth grade. The T-shirt will be in placed in a reseal able clear plastic bag. Also in the bag will be a cover letter that describes Rotarys' ideals of promoting literacy in our community. The obstetrician staff handed out the packets to the new mothers

START DATE – Previously, the Rock Springs Rotary Club gave 550 packets to personnel at Memorial Hospital of Sweetwater County in Jan 2015. The Rock Springs Rotary Club has everything on hand to do 400 more packets, with the exception of the "Every Child Ready to Read" booklets. The club had purchased all their remaining booklets last year. This year the company that produced the booklets has printed a new version and it asking a higher price that last year. They are asking nearly \$20 each, we have been successful in getting the price down to \$7.50 each plus shipping.

COMPLETION DATE – Our effort if this grant application is successful is to use the new 400 booklets up With all the baby T-shirts have on hand. Based on estimates from the hospital of annual births of 500 plus per year this should be enough for the second year of the Literacy project. Thus the literacy project may last for as long as two years.

January, 2016

Start Date (Cannot commence before grant is approved!)

Dec 2016

Estimated Completion Date

3. Describe how the project will benefit the community and/or improve the lives of the less fortunate.

In general, it is the hope of the Rock Springs ROTARY club that the packets given to the new baby's parents, will be an incentive to them to not only read to their babies but to be aware of the importance of reading in the literacy of their baby.

As one of our Rotary club members stated the baby learns to read up to the second grade and after the second grade they are reading to learn.

4. Describe the nonfinancial participation by sponsoring Club Rotarians in the project (i.e., How Rotarians will be involved).

Rock Springs Rotary club members will be involved in the assembly of the T- shirts and the booklets into the clear plastic packets for the hospital. The actual presentation of the baby T-shirt packets will be made by the trained staff working in the maternity ward of the hospital.

Are other Rotarians, either local or international, going to be involved in the project? *Not at this time.* How?
Only members of the Rock Springs Rotary club will be involved in this project.

5. How will the general public know this is a Rotary-sponsored project? Please provide details of the publicity plan.

A photo opportunity will be scheduled with the hospital showing members of Rotary delivering the Literacy packets to the Obstetrician staff at the hospital. The local newspaper and a internet news coverage called SweetwaterNOW will provide the public with knowledge of the Literacy project Due to privacy requirements at the hospital, the names of people receiving the packets will not be given out.

On occasion, the Rotary club plans on placing articles in the newspapers promoting reading and literacy in the community.

6. Project Contact – Who in the club is the primary contact who will monitor progress, provide additional information if needed and submit the final report?

<u>John T Nelson</u>	<u>Past President – Grant Administrator</u>	<u>jnelson1942@msn.com</u>
<i>Primary Contact Name</i>	<i>Rotary Title/Position</i>	<i>E-mail</i>
		Cell – 307-389-6074
<u>1229 Lowell Ave.</u>	<u>Rock Springs</u>	<u>Wyo</u>
<i>Address</i>	<i>City</i>	<i>State</i>
		82901 <u>307-362-6893</u>
		<i>Zip</i> <i>Phone</i>

7.

International Projects only – How will the club assure that the project is completed as proposed, funds spent appropriately, recognition of Rotary visible, and reports completed in a timely manner? **Invoices, bank records and other documentation is required to verify expenditures.**

N/A

8. Provide project manager name and contact information if different from 6 above.
Same as No. 6

Contact Name	Rotary Title/Position	E-mail
Address	City/State/Zip	or Country Phone

9. Cooperating Organization – If the project involves a cooperating organization, please provide the name of the organization below and attach a letter of participation from that organization that specifically states its responsibilities and how the organization will interact with Club Rotarians for the project. **By signing this application, the Rotarian sponsors endorse the organization as reputable, responsible, registered with the project community, and ensure grant activities, including the conversion of funds, are in accordance with local law.**

Memorial Hospital of Sweetwater County

Name(s) of Cooperating Organization(s)

10. Budget – Provide an estimate of the total cost of the project. Information regarding the items to be purchased should be included, if known. **Retain copies of any preliminary invoices for your records.** Add lines if needed. Please note that district grants will not fund: travel expenses, scholarship programs, construction of new buildings, or fundraising activities not directly related to a humanitarian activity.

Item	Cost
T-shirts complete with printing THESE ARE ALREADY PAID FOR!	\$ 0
Every Child Ready to Read booklet (a \$7500 value)	\$ 3000
Color cover letter – printed on 8.5 X 11 sheet	\$ 0
Plastic resealable clear plastic bags (1000)	\$ 0
Cardboard boxes for Rotary packet storage	\$ 0
Misc items – Shipping, advertising, etc.	\$ 0
TOTAL COST OF PROJECT	\$ 3000

11. Financing – Provide the sources and amount of financing for this project. The total financing must meet the total cost of project. Add lines if needed.

Amount requested from District: \$ 1500 (Maximum \$5,000)

Source of Funds	Amount
Club	\$ 1500
District	\$ 1500
Other:	

TOTAL AMOUNT OF FINANCING	\$ 3000

12. Signatures

As President of the Rotary Club of Rock Springs, Wyo, I hereby affirm that the club's board has voted to undertake this project as an activity of the club. The club is qualified under district requirements. In consideration of receipt of these grant monies, we agree to abide by the *Club Memorandum of Understanding* and to submit a final report within 30 days of completion of the project. If the Primary Contact for this project is unavailable or unable to submit the required reports, I understand that I must complete and submit them within the required timelines. Failure to file complete and timely reports will necessitate the repayment of all grant funds received. I also affirm that all information in this grant application is true and accurate, to the best of my knowledge.

<u>Ken Wilbert</u> <i>Club President's Name (please print)</i>	 <i>Club President's Signature</i>	<u>Mar 1, 2016</u> <i>Date</i>
<u>John T Nelson</u> <i>Primary Contact for Grant (please print)</i>	 <i>Primary Contact for Grant Signature</i>	<u>Mar 1, 2016</u> <i>Date</i>
<u>Jon Adam</u> <i>Club Foundation/Grants Chair (please print)</i>	 <i>Club Foundation/Grants Chair Signature</i>	<u>Mar 1, 2016</u> <i>Date</i>
_____ <i>District Grant Committee Member (please print)</i>	_____ <i>District Grant Committee Member Signature</i>	_____ <i>Date</i>

Send completed application to:
E-Mail: district5440grants@gmail.com

For District Use Only

Review and Approval Signatures			
_____ District Grants Committee Chair	_____ Date	_____ District Foundation Committee Chair	_____ Date
_____ District 5440 Governor Signature	_____ Date		
District Grant Number: _____		Application Number: _____	
Notes:			