



# The Rotary Foundation – Rotary District 5610

5610/  CAP Grant Application *(check one)*

Maximum CAP Grant Amount: \$1000

## 1. Basic Information (Should match information in [matchinggrants.org](http://matchinggrants.org)).

**Grant #** P-3019 *(Assigned by [www.matchinggrants.org](http://www.matchinggrants.org))*

**Lead Rotary Club:** LeMars, IA

**Participating Rotary Clubs:** [Click here to enter text.](#)

**Project Title:** Adaptive Bicycle

### Project Summary

This project would allow us to purchase a custom built adaptive bicycle for a special needs child in our local county.

**Amount Requested:** \$ 650

**Minimum Acceptable†:** \$ 400

† Please enter the smallest award that you could accept while keeping the project viable. Entering a smaller number here does not necessarily mean that you will not receive your full request, but it will be helpful in determining how to allocate funds should the total requests in a given year exceed the amount available.

What Area(s) of Focus Will This Project fulfill? (Optional for CAP Grant.) *Check all that apply.*  
*This should match the information entered into [matchinggrants.org](http://matchinggrants.org).*

Peace & Conflict Resolution/Prevention

Basic Education & Literacy

Disease Prevention & Treatment

Economic & Community Development

Water & Sanitation

Maternal & Child Health

## 2. Project Description

*Describe the project, its location, and its objectives. Describe how the project will benefit the community and/or improve the lives of the less fortunate. Also include sustainability elements.*

*This may be the same as in [matchinggrants.org](http://matchinggrants.org) but in many cases may have additional information. Information may be included in this request that is not appropriate to publicly display as when this report is uploaded to the website, access can be restricted to only those people associated with this project.*

There is a local group which has started in 2015 called Josh's Ride. They found a need in our community when one family was hoping for a specially fitted bike for their special needs child. They are working in pairing donors with children and help in the process of getting an adaptive bicycle for that particular child. These bikes are specially built for each child based on their needs. They may be 2 or 3 wheeled, may include a steering arm aid, safety belts, safety brakes, and specialty seats if needed. Prices range from \$1250 to \$1900. Since the start of Josh's Ride in 2015, they have helped deliver over 50 bikes.

ESTIMATED START DATE OF PROJECT: 10/1/2019

ESTIMATED COMPLETION DATE: 6/1/2020

## 3. Describe non-financial participation by Rotarians in the project (i.e., Rotarian activities).

The Le Mars Rotary would contact Josh's ride to help with the process of purchasing a bike based on need. We would help in the celebration of gifting the bike and any advertisement. This is a great way for Rotary to join with others and show what good things come from our organization.

**4. How will the general public know this is a Rotary-sponsored project? Please provide details, such as media publicity, report for the District news, or display of the Rotary logo.**

If accepted, we would have a public celebration donating the bike, which would include our local paper and radio coverage. Rotarians would present the bike to the child and family. It would be appropriate to have our banner there to take photos and share this showcased event in our District news.

**5. Project Contacts: Two Rotarians must be listed who will provide oversight and management of the project funds. One of these two individuals should enter project into [www.matchinggrants.org/district](http://www.matchinggrants.org/district) and both should be given Administrative Access for the project there.**

PRIMARY CONTACT NAME

Steve Albert

ADDRESS

1385 Central Ave SW, Le Mars, IA 51031

TELEPHONE

712-540-2710

ROTARY POSITION / TITLE

member

EMAIL

stevenearlalbert@gmail.com

SECONDARY CONTACT NAME

Bruce Young

ADDRESS

1024 14th Ave SE, Le Mars, IA 51031

TELEPHONE

712-541-9822

ROTARY POSITION / TITLE

member

EMAIL

bruce@youngtogether.com

**6. Cooperating Organizations — 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 Rotarians will interact with the organization in the project. *By signing this application, the Rotarian sponsors endorse the organization as reputable, responsible, registered with the project country, and acting within the laws of the project country.***

*Cooperating Organization(s): [Click here to enter text.](#)*

**8. Income (rounded to the nearest whole dollar)**

Source	Amount
District Grant Funds Requested	\$ 650
Club Funds	\$ 650
Other Income (Specify)	\$
<a href="#">Click here to enter text.</a>	\$
<a href="#">Click here to enter text.</a>	\$
<a href="#">Click here to enter text.</a>	\$
<b>Total Project Income</b>	<b>\$ 1300.</b>

**9. Expenses** (rounded to the nearest whole dollar)

*Please include a complete, detailed, and itemized budget for the entire project. Supporting documentation utilized for the development of this budget may be requested. Include pro-forma invoices for equipment that will be purchased through this grant. (please be specific and add an additional sheet as needed)*

*Remember that all expenditures will need to be supported by documentation.*

Amount

Adaptive bicycle	\$ 1300
Click here to enter text.	\$
Click here to enter text.	\$
Click here to enter text.	\$
Click here to enter text.	\$
Click here to enter text.	\$
<b>Total Project Expenses</b> (MUST MATCH TOTAL PROJECT INCOME!)	\$ 1300

**10. Authorization**

All Rotary clubs/districts involved in this project are responsible to The Rotary Foundation for the conduct of the project and for reporting on it. *The electronic signatures entered on the [www.matchinggrants.org](http://www.matchinggrants.org) website for this application confirm that the signors understand and accept the responsibility. The signatures also affirm that all information in this application is true and accurate, to the best of their knowledge.*

In order to be considered, this application MUST be digitally signed on [www.matchinggrants.org](http://www.matchinggrants.org) by the President(s) and at least one other club officer (President-Elect if known) of all sponsoring Rotary Clubs for the year that the grant will be funded. In addition, At least one of the contacts listed in Section 5 above must also digitally sign the application if they are not the President or President-Elect.

## **5610/CAP (Community Assistance Program) Grant Checklist** **Rotary Year 2019-20**

*Initial each item and return with your application.*

- The First Contact on this grant is the grant writer, who attended the Club Grant Training.
- The Club has submitted a signed Club Memorandum of Understanding (MOU) for the current year.
- The Club is in good standing with the IRS and has submitted a current IRS Form 990 receipt to prove their non-profit service club status.
- This project is a new effort for our club—it is not a project that we have done previously, either with CAP Grant or 5610 Grant funding or as an ongoing club-sponsored project.
- CAP Grants only: The club is matching (50%) the entire amount being requested, up to \$1000. The project may be larger than \$2000 (the grant plus the club's funding), but the maximum grant award is \$1000.
- This project is totally or at least primarily sponsored by the Rotary Club—we are not simply funding the project of another organization. No funds will be paid directly to another charitable organization.
- No funds will be utilized to support travel expenses, salaries, administrative or other overhead costs, or the operational costs of another organization.
- Work on the project will not begin until the grant is approved by the District and the Club has received the grant award (check is in the bank).
- The project will be completed in its entirety within 24 months of grant award. Reports will be provided to the District when required. (see the Grant Report for details).
- The lead/sponsor club agrees to adhere to all stewardship requirements set forth in the Club Memorandum of Understanding.
- The lead/sponsor club will publicly identify the project as Rotary sponsored.
- No funds from this grant will be used to directly benefit a Rotarian or any Rotary employee, including those employed by a club, district, Rotary International, or any other Rotary entity.
- No funds from this grant will be used to directly benefit a relative, including spouses and in-laws, of any Rotarian or Rotary employee as defined above.

***Questions? Contact:***

**Bruce Young, District Grants Subcommittee Chair**  
**(712) 541-9822**  
**[district5610grant@gmail.com](mailto:district5610grant@gmail.com)**

**Deadline for 2019-2020 Rotary Year is July 31, 2019.**