



## Rotary District 5390 District Grant Application

**Your club must have an approved/qualified status from the District Stewardship Committee prior to submitting this District Grant Application**  
**Grant Applications for the upcoming Rotary Year are due by March 31<sup>st</sup>**  
**Please submit to the District Grant Selection Committee**

Sponsoring Rotary Club:

If other Rotary clubs are involved in the project, please list:

Project Title:

Project Start Date:

Projected Completion Date:

Provide a specific and detailed project description. This description will be used by the District Grant Selection Committee. Include the scope of Community impact and the unmet need (s) this project will address. Clearly state Rotarian involvement. (Add as an attachment if necessary)

Provide a 50-word summary that describes the project and benefit to the Community. This is required by Rotary International (RI) and will be used when the District submits this grant request to RI. Be very concise and specific. (Add as an attachment if necessary)

**Your project goals will align with which Area of Focus: (Please Circle One only)**

For more information please visit: [www.rotary.org/myrotary/en/areas-focus](http://www.rotary.org/myrotary/en/areas-focus)

Peace & Conflict Prevention/Resolution

Maternal & Child Health

Disease Prevention & Treatment

Basic Education & Literacy

Water & Sanitation

Economic & Community Development



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Amount of Grant Funds Requested (\$):

Club Matching Contribution (\$):

(Please note this contribution must be greater than or equal to the amount of grant funds requested)

# of Rotarians who will directly participate in the project:

How will Rotary be identified at the project site?

Provide a budget and identify how the requested funds will be spent. Your detailed budget must include the following:

- Estimated breakdown of expenses.
- Will there be other sources of funding for the club project? If so, please list the additional source(s), and include their contribution:
- Does the project income (matching funds, grant funds, other sources of funding) match the project expenses?

If needed, please reference the **SAMPLE** District Grant Budget

Please add an additional attachment if necessary

*(PLEASE RETAIN ALL RECEIPTS. If funds awarded are more than the invoices/receipts used to complete the project, the unused funds are required to be returned to Rotary District 5390)*

Project Oversight Name, Email, Phone:

Current Club President-Elect Name, Email, & Phone (will be club president during the grant year):

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**District Grant Selection Committee:**

Sue Carstens – Chair  
Phone: 406-270-2760  
CarstensSue@gmail.com