



Instructions: Please fill out the attached applications to be considered for a grant donation from the Rotary Club of Cashiers Valley Charities. Information submitted here will be used by the club for the express purpose of considering a donation to your organization and will be held as private and confidential.

Terms of Funding: Applicants who receive Rotary Grants must provide each of the following with their application or during the course of their Funding Year, as applicable:

- An application for membership with the Rotary Club of Cashiers Valley, attached here. The person named on this application will serve as point of contact for your organization. (Times and locations for weekly meetings and other events are published on the Cashiers Rotary website at CashiersRotary.org).
- A status report on the program being funded every two (2) months after grant monies are received
- A final report delivered no later than one (1) year from the date grant monies are received or upon completion of project, whichever comes first

Please also attach your organization's 501(c)3 Verification letter and any marketing, promotional, or informational materials relevant to your organization or this project.

To Submit via Email: This form has been digitally enabled. You may download it to your device, then complete, save, and send it back as an attachment to rotaryclubofcashiersnc@gmail.com.

To Submit by Mail: Complete this application and send it to Rotary Club of Cashiers Valley Charities, PO Box 833, Cashiers, NC 28717. Otherwise, you may submit this application directly to a Cashiers Rotarian.

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Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

Is this a 501(c)3 organization? \_\_\_\_ Yes \_\_\_\_ No      Federal ID#: \_\_\_\_\_ Pending: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Organization Email: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Amount of Funds Requested: \_\_\_\_\_ Date Needed: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Has your organization made a project presentation to the Rotary Club? \_\_\_\_ Yes \_\_\_\_ Date \_\_\_\_ No

Would a representative of your organization be willing to make a presentation to RCCV? \_\_\_\_ Yes \_\_\_\_ No

Please answer the following questions completely. If you need to use separate sheets of paper, if needed.

What is your organization's mission statement?

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Describe the project for which the funds will be used.

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Describe the population that would directly benefit from this project.

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How do you plan to recognize RCCV’s contribution to your project?

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Total Project Budget: \_\_\_\_\_ Amt. Raised to Date: \_\_\_\_\_

How do you plan to raise the balance of funds needed? (other organizations, private donations, etc.)

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Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Attach terms & copies of correspondence to this document.

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FOR ROTARY USE ONLY

Date Received: \_\_\_\_\_ Amt. Requested: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approved (Yes or No): \_\_\_\_\_ Amt. Granted: \_\_\_\_\_ Date Dispersed: \_\_\_\_\_

Reviewer(s): \_\_\_\_\_

Notes/Comments: \_\_\_\_\_

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## Membership Application

**Sponsoring Rotarian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **New Member Information** (To be filled out by applicant; please print)

**Name:** \_\_\_\_\_ **Birthday (MM/DD):** \_\_\_\_\_

**Local Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Home** \_\_\_\_\_ **Work** \_\_\_\_\_ **Mobile** \_\_\_\_\_

**Alt. Phone:** \_\_\_\_\_ **Home** \_\_\_\_\_ **Work** \_\_\_\_\_ **Mobile** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Residency:** Full-Time \_\_\_\_\_ Part Time \_\_\_\_\_ Seasonal \_\_\_\_\_ **Since (MM/YY):** \_\_\_\_\_

**Employment:** Retired \_\_\_\_\_ Working \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**If working, current employer:** \_\_\_\_\_ **No. of Years:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Location (city, state):** \_\_\_\_\_

**Partner/Spouse:** \_\_\_\_\_ **Anniversary (MM/DD):** \_\_\_\_\_

**Former Rotarian or member of another Club?** No \_\_\_\_\_ Yes \_\_\_\_\_ **Dates:** \_\_\_\_\_

**Club Name:** \_\_\_\_\_ **Location (City, State):** \_\_\_\_\_

**Positions Held or Honors, Awards or Recognitions Received:**

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**List past community activities in which you have participated (Church, volunteer activities, etc.):**

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Are you willing to donate your personal time to Rotarian activities and why?

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Why do you want to become a Rotarian?

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Can you commit to attend weekly meetings? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, why? \_\_\_\_\_

Are you willing to attend additional Rotarian training prior to acceptance into the club?

Yes \_\_\_\_\_ No \_\_\_\_\_ If not, why? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Committee Members: _____

Membership Committee Action Date Referred to Rotary: _____

By Whom (Rotarian or Individual Request): _____

Date(s) Attended Rotary as Guest: _____

Sponsor(s): _____

Date Assigned: _____ Orientation Date: _____ Induction Date: _____

Committee Member Signature: _____

NOTES:
