



# Vero Beach Rotary Charities Foundation Grant Application

Date Requested \_\_\_\_\_  Approved (Initial \_\_)  Denied (Initial \_\_)

Organization Name \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ 9-B, \_\_\_\_\_

Telephone \_\_\_\_\_ 501(c)3? \_\_\_\_\_

Year Founded \_\_\_\_\_ United Way Agency? \_\_\_\_\_

Mission \_\_\_\_\_  
\_\_\_\_\_

Individual Submitting Request \_\_\_\_\_

Title \_\_\_\_\_

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

Project Title \_\_\_\_\_

Project Date/Duration \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_

Specifically how funds will be used \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A project report will be required within a month of project conclusion**