



BROCKTON ROTARY CLUB
APPLICATION FOR CHARITABLE DONATIONS

1. Organization
Address
Contact
Telephone
E-Mail
Are you an 501(c)(3) non-profit? Yes [] No []

2. Amount requested from Brockton Rotary: \$

3. Brief description of specific purpose for which funds are requested.

4. How will funds be utilized locally?

5. What will be the broad based impacts of these funds?

6. How will your organization publicize the Rotary name or symbol as part of your program/activity?

7. Have you requested or will you be requesting funds from another organization for this purpose? Yes [] No []
If yes, please identify other organizations and amounts requested

8. Did you receive a grant from Brockton Rotary last year? Yes [] No []
If yes, you must complete and submit the Compliance Report Form (see Page 3) to be eligible to receive a grant for the current year. THIS IS A NEW REQUIREMENT.

9. How did you hear about our organization?

I / we agree to use the funds as stated in this application.

Signature of Applicant Date

Accepted by Rotary Date



CRITERIA

To receive a charitable contribution from the Brockton Rotary Club, the applicant must meet 1 or more of the following criteria:

1. **Local** - the funds must be used locally, and
2. **Charitable** - must be an organization, not an individual, that is clearly philanthropic in nature, and
3. **Special Function/Program** - the Rotary Club must see a specific end result or program/project (no general operations, salaries, administrative and maintenance costs).
4. **Broad Based Impact** - the contribution must reach a large segment of the Brockton community, and
5. **High Visibility for Brockton Rotary** - if possible and appropriate, the applicant that receives a contribution must agree to publicize the Brockton Rotary name or symbol as part of the program, activity, etc.
6. *No money will be given to any charitable organization for scholarships.*
7. **Senior Community Programs/Activities** – organizations in the City of Brockton that specifically help/work with our Senior community.

FOCUS AND ADDITIONAL CRITERIA FOR DONATIONS

In addition to the general criteria for charitable contributions, the Donations include the following focus:

- Veterans
- Education
- Youth
- Health
- Local focus in Brockton

Mail completed application to:
Rotary Club of Brockton
Donations Committee
P.O. Box 537
Brockton, MA 02302

Donations applications are accepted all year. Please note we distribute approved donations in the late fall & late spring.



Brockton Rotary Charitable Giving Committee Compliance Report Form

Organization: _____

Name of Project: _____

Amount of Grant: \$ _____

1. Purpose for requested funds:

2. Attach copies of receipts and/or photos of equipment /or if an event, proof that it took place.

3. Have you expended all of the grant funds? If not, how much is remaining and when will it be spent?

If an Organization received a grant during the prior year, this Compliance Report Form **must be** completed and received by the Brockton Rotary Club with application. Organizations not submitting a completed form **will NOT** be eligible to receive a grant in the current year. Mail the completed form to:

Brockton Rotary Club, c/o Donations Committee, P.O. Box 537, Brockton, MA 02302

Signed: _____

Print Name: _____

Position: _____

Date: _____