



Rotary Club of Southwest Pacific County Peninsula WASHINGTON, USA

Funds Request

Thank you for your interest in partnering with our club! This document is designed to evaluate your request for a donation from our Rotary club.

Please consider the following as it gives you a better idea of how we evaluate which projects we are able to partner:

- Rotary is an International Service Organization that is involved in a diversity of projects. At the heart of the organization is the object of **Service Above Self**.
 - Rotary partners with individuals and groups for the advancement of world peace, health, hunger eradication, humanitarian aims, and literacy/education.
 - Our club has a preference for projects that benefit children in need.
 - Rotarians evaluate their life decisions using the 4-Way Test:
 - Is it the truth?
 - Is it fair to all concerned?
 - Will it build goodwill and better friendships?
 - Will it be beneficial to all concerned?
- All requests are evaluated at with these principles in mind

We do not stand in judgment on the legitimacy of your project. However, funds, unlike needs, are limited. To help us choose projects that are the best fit for us, we ask that you fill out the form that follows *completely*.

Thank you,

Rotary Club of Southwest Pacific County Peninsula

Incomplete Requests May Not Be Funded	
Organization Name	
Contact Name(s)	Phone(s)
Mailing Address	
Email Address(es)	
Date of Event/ Project/ Need	

Club: PO Box 606 Seaview, WA 98644 | Foundation: PO Box 752 Ocean Park, WA 98640
 SW Pacific County Peninsula Rotary Foundation is a 501(c)(3) organization. Tax I.D. #27-2232531
 Peninsula Rotary meets Tuesdays 7:30 am and 5:15 pm at the Lightship Restaurant in Long Beach, WA
 Join us online at <http://beachrotary.org> & <https://facebook.com/beachrotary>

Type of Event/ Project/ Program <input type="checkbox"/> Health/Humanitarian <input type="checkbox"/> Literacy/Education <input type="checkbox"/> Arts/Humanities <input type="checkbox"/> Public Relations <input type="checkbox"/> Community Improvement <input type="checkbox"/> Other:	
Dollar amount and/or other assistance requested	
Describe your request. If financial, how will the funds be used?	
List Agencies/Organizations that should, could, or must be involved and indicate whether contact has been made.	
Have you spoken with the necessary agencies/organizations that would benefit, or be affected by, your project?	
Is there a person or an organization already doing what you want to do?	
Is this for the benefit of a single person or does it represent a group need?	
Are you willing to present your project to our Rotary club?	
If funds are granted, will you come to a meeting to report on the outcome?	
I hereby certify that all of the facts, figures, and representations made in this application are true and correct to the best of my knowledge. I further certify that this application is made with the approval of this organization's governing body.	
Signature:	Date:
<i>For Club Use</i>	
<input type="checkbox"/> Approved <input type="checkbox"/> Rejected Comments:	
President's Signature:	Date:
Treasurer's Signature:	Date:

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