

Chartered in 1979

Chicora Rotary



SERVICE Above Self

GRANT APPLICATION

PO Box 70101 - Myrtle Beach, SC 29572

Please use the back of the form for any overflow or additional information.

Name of organization:

Address:

Phone: Fax: Email:

Year founded: IRS 501(c)(3)? Y ☐ N ☐ Nationally affiliated? Y ☐ N ☐

Type of services (check all applicable): Health & Human Services ☐ Youth Activities ☐

Recreation ☐ Religious ☐ Education ☐ Culture & arts ☐ Child Welfare ☐ Housing ☐

Other (Explain briefly)

Mission statement:

Amount of request \$ for Operations ☐ Capital Program ☐

Total budget of the organization \$

If nationally affiliated, percent of total budget sent to headquarters? % ☐ N/A

Specific purpose of this grant:

Other donors to this project of \$1,000 or more (four highest):

Signed Date Position:

For Chicora Rotary Treasurer:

Previous Chicora Rotary gifts to this organization (amounts & years):

Board action & date:

Check issued: amount \$ date check #