



Anniston Morning Rotary Club Foundation

P O Box 1861, Anniston, AL 36201

Grant Application Form 2011 for Dancing With Our Stars

We are pleased to announce the first year of acceptance of grant applications by the Anniston Morning Rotary Foundation. These funds will be made available from proceeds generated by the DWOS fundraiser. Grants will be awarded to organizations and programs providing children's services.

Applicants may apply for a grant of no more than 12 months duration in the \$1,000 - \$10,000 range. The Board will require that any children's services project funded by the Foundation align with at least one of the following areas of focus adopted by Rotary International:

- Peace and conflict prevention/resolution
- Disease prevention and treatment
- Maternal and child health
- Basic education and literacy

The following guidelines will apply:

1. No grant funds will be awarded for administrative overhead or indirect costs.
2. Because this is a one-year grant, no grant funds will be awarded to support recurring costs such as ongoing salaries, rent, monthly phone bills, etc.
3. Personnel expenses incurred exclusively for the grant activities will be considered, however the temporary nature of the duties must be made clear in the application.
4. Applicants should attach documentation of the organization's 501(c) 3 status.
5. Applications must be limited to no more than three typewritten pages.
6. Applications must be submitted on time and be complete as outlined above

Applications are to be sent electronically at www.annistomorningrotary.com or postmarked no later than July 15, 2011, to:

Anniston Morning Rotary Foundation

P O Box 1861

Anniston AL 36202

Phone: 256-237-1773

Fax: 256-237-1774

Grants will be reviewed and awarded by the Foundation Board of Directors.

Please print or type the following information. This form must be postmarked no later than July 15, 2011.

Please send completed form to: Anniston Morning Rotary Foundation, P O Box 1861, Anniston AL 36202

Region Served: _____

Organization's Legal Name: _____

Physical Address: _____

Mailing Address: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

Mission statement and/or purpose: _____

Other funding sources: _____

Amount requested _____

Signatures:

Submitted By: _____ Title: _____ Date: _____

Organization President/Director _____ Date: _____

1. Organizational Overview: Mission, number of consumers served, programs/services (in 100 words or less):

2. Brief description of Project: including timeline:

3. What specific outcomes will result from this project?

4. How will this improve the strength of your organization?

5. How will you measure your success in this progress?

6. Please list itemized Budget (No funds may be used for administrative overhead or indirect costs).

**Please direct questions to Alan Green, President, (256) 741-1829
or James Edgar, Chairman, at (256) 237-1773.**