



Rotary Club Of Sharon Charitable Fund, Inc.
P.O. Box 16 (Gifts of Hope) / P.O. Box 53 (General/Youth/Diversity)
Sharon, MA 02067

Is this grant on behalf of an individual or an organization? Individual(s) Organization

Name(s): _____

Address: _____

Phone: _____

Email: _____

If grant is to a non-profit organization, please attach summary sheet from www.charitynavigator.org.

Amount of Request: \$ _____

What will this grant be used for? _____

Why are you requesting the grant from the Rotary Club of Sharon? _____

Is requestor related in any way to the organization (Director, Officer, Board member, employee, etc.)? Yes No

If yes, please explain: _____

Which Rotary core cause(s) or program(s) does this grant address (see www.rotary.org)?

- Promoting Peace Fighting Disease Water/Sanitation/Hygiene Mothers & Children Education
- Local Economies Youth Programs/Scholarships RYLA Peace Fellowships Youth Exchange
- New Generations Service RI Grants Senior Programs Sharon resident(s) in need
- Other (explain): _____

Requested by: Rotarian Non-Rotarian

Name: _____ Signature: _____ Date: _____

If non-Rotarian, include the following:

Name: _____

Address: _____

Email: _____ Phone: _____

* Please attach any other supporting documentation, photographs, etc.

Grant approved:

Amount: \$ _____ Additional Conditions: _____

Date: _____

Tally: Yes No _____ Yes No _____ Yes No _____

Yes No _____ Yes No _____ Yes No _____

Yes No _____ Yes No _____ Yes No _____

Fund from account: Gifts of Hope General Youth Diversity (Lions Approval?)