



Rotary Club of Santa Clara

Donation Request

Date: _____

Project/Beneficiary Organization: _____

Amount Requested: \$ _____

Sponsoring Member: _____

Briefly explain how the funds will be used or provide a description of the project:

Where is your organization located? _____

Where are the recipients of this donation located? _____

How many people will benefit from this donation? _____

Who will be the beneficiary(ies) of this donation? _____

Estimated time to complete the project: _____

Total amount to complete the project: _____

If your request is approved, please send the Club an update on your project 6 months after the award is granted.

Briefly describe how Club members can participate in this project:

How will the Club be recognized for this donation?

Requestor's Signature

Date

Requestor Contact Information:

Name: _____

Phone Number: _____

Email Address: _____

Address: _____

Submit to:

Secretary@santaclararotary.org

Or

Mail to:

ROTARY CLUB OF SANTA CLARA
P.O. BOX 111
SANTA CLARA, CA 95052

Space Below for Use by Rotary Club of Santa Clara Only

Approved

Comments/Reasons for Rejection:

Club President/Community Service Director

Date