

The Rotary Club of Brownsville Sunrise
Local Funds Committee Application 2025-2026

*Amount Requested: \$ _____

To strengthen its service impact in the local community, **The Rotary Club of Brownsville Sunrise (RCOBS)** is awarding grants as funds are available to non-profit organizations in Brownsville, TX. RCOBS will use a competitive application process to identify projects at a local non-profit organization that will provide an essential and sustainable improvement to the quality of life in our community. These funds are available to help with new programs or expand existing programs.

Please send your completed application form to:
Rotary Club of Brownsville Sunrise - brownsvillesunrise@gmail.com

Part A: General Information

1. Name of organization: _____
2. Contact name and title: _____
3. Contact address: _____
4. Contact phone number: _____
5. Contact fax number: _____
6. Contact e-mail: _____
7. Organization website: _____

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8. Please tell us about your organization. What community does it serve? (One hundred words or less)

9. Are you a non-profit organization? If so, please provide proof of your institution's tax-exempt status under the Federal Internal Revenue Code. If this is not available, please explain.

10. Does your organization operate only within the City of Brownsville/Surrounding Areas? If not, please explain.

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Part B: Description of Need

1. In general terms (two hundred words or less), please describe your project concerning: a. why the project is essential and

2.

b. the issues/problems the project is addressing and

c. a proposed timeline for your project.

2. Please itemize the expenses you expect to incur and indicate the expenses that the Rotary funds will pay for if your project is awarded funding.

3. Are you currently requesting assistance from other charities or sources to fund this project? If yes, please explain.

4. If this project requires permits or letters of approval from any regulatory agency, have you obtained these permits or letters? If not, why not? Have any permits been denied or letters refused? If so, please explain.

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5. Could funds for this project be provided through other public sources? If so, why do you feel the Rotary Club of Brownsville Sunrise is the best source of assistance?

Part C: Other Information

1. Has your organization received assistance from the Rotary Club of Brownsville Sunrise? If yes, when and for what purpose?
2. Will the project benefit any employee, volunteer, or board member in your organization or the dependent of any employee, volunteer, or board member? If so, please explain.
3. Does your organization support or oppose candidates in political campaigns in any way? If yes, please explain.
4. Does your organization attempt to influence legislation in any way? If yes, please explain.

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Grantee does not discriminate against anyone because of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, or disability.

The grantee promises that the proposal was filled out truthfully and correctly.

Grantee Organization Grant Committee, Rotary Club of Brownsville Sunrise

Signer on behalf of the organization	Date
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Print Name on behalf of the organization	Date
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Title of signer

Date