

APPLICATION FOR FRCS ENHANCE GRANT/ DESIGNATED FUND
Important Note

1. Applications for FRCS funding shall be submitted to Secretariat for registration.
For information, please contact the FRCS Secretariat at Tel. 6538 9901 or email to secretariat@rotarysingaporefoundation.org
2. The registered application shall be reviewed by the Programs & Projects Committee and the Finance Committee of FRCS and approval by the FRCS Board of Directors.
3. Expenses must not exceed 30% of total funds raised for tax exempted receipt.
4. If the project is aborted for any reason(s) at any point in time or if there are remaining funds from the project, indicate the course of action.
5. Please note that all project funds not utilized within 2 years from date of approval shall automatically be transferred to general fund in the Foundation
6. The Rotary club responsible for the project is required to create a committee of at least two Rotarians who are in charge of the project. Where the project involves multiple Rotary clubs, then the responsibility of such clubs herein shall be on joint basis. The committee members must expressly commit for the duration of the project.

A APPLICATION PARTICULARS		Rotary Year 2016/2017	Date:
A1 Name of Applicant (Rotary Club)			
A2 Project Committee Chairman – Major Contact Person	Name		
	e-mail		
	Mobile Phone		
	Signature		
A3 Committee Members (Min 2)			

B PROJECT PROPOSAL (For New Local Project Only)		
B1 Project	Title	
	Value	
	Venue/Address	
	Start Date	
	End Date	
B2 Beneficiary Name(s)		
B3 Number of people receiving benefits		
B4 Number of participating Rotarians		
B4 Remarks, if any		

C PROJECT BUDGET A Separate Sheet is Acceptable		
Items Budgeted or Quotation Called	Supplier(s)	Amount
Total		

D PROJECT DESCRIPTION A Separate Sheet is Acceptable	
Explanation: In this section, describe in detail the needs the project shall address, the intent of the project, how the project will be implemented, and how Rotarians will be directly involved in the project.	
1. If other Rotary Clubs/organizations are involved in the project, please furnish the names:	
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
2. Describe the project and the problem or how the needs of beneficiaries shall be addressed.	
<input type="radio"/>	
3. Who shall be the beneficiaries and how the project will benefit the community in need?	
<input type="radio"/>	
4. What are the estimated total funds required to carry out the project?	
<input type="radio"/>	
5. Who or what are the target sources of funds to be raised?	
<input type="radio"/>	

6. Is there a limit to the total funds to be raised?
○
7. Provide the estimated length of time needed to complete the project, specify fund raising timeline as well as other aspects of the project timeline.
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8. How shall the Rotarians in Singapore actively participate in the project? (Please note that financial support is not considered active involvement)
○
9. If the project is aborted for any reason(s) at any point in time or if there are remaining funds from the project, indicate course of action.
○

E FUNDRAISING DETAILS		
Donation Expected	Collection Period	Amount \$
E1 Rotarians in Applicant's Club		
E2 Rotarians in Other Sponsored Clubs		
E3 Friends of Rotarians, Individual		
E4 Corporate/Organisation		
E5 Total Fund Expected E1-E4		
E6 Fund Deficit	*Apply FRCS Funds	
*FRCS Terms and Conditions Applied (Please Indicate Your Plan and Tick on Box below)		
<input type="checkbox"/>	Apply for FRCS Enhance Grant	<input type="checkbox"/> Apply for FRCS Designated Fund
<input checked="" type="checkbox"/>	5% on total fund raised will be charged (Suspended for one year until further notice)	

F AUTHORIZATION

Explanation:
 By signing against our respective names, the Rotary Club President concerned as well as the committee members as detailed in the **Application Particulars** above, affirm support of the project by the Board(s)/members of their Club(s). We understand and accept full responsibility for the project and abide by the amount of the approved Grant / Fund and the terms and conditions set out in this Application.

CLUB PRESIDENT Name:	Signature:	Date:
Phone Contact:	Email:	

CLUB TREASURER Name:	Signature:	Date:
Phone Contact	Email:	

G OFFICIAL ACTIONS

Consideration	Committee	Decision	
1. Submission	FRCS Secretariat(1 Day)	Application No.	<input type="text"/>
		Application Registered On	<input type="text"/>
		<input type="text"/> Name and Signature	<input type="text"/>
2. Evaluation	Programs & Projects Committee (3 Days)	<u>FRCS Enhance Grant Approved</u>	<input type="text"/>
		<u>FRCS Designated Fund Approved</u>	<input type="text"/>
		<u>Or Disapproved</u>	<input type="text"/>
		<input type="text"/> Name / Date / Signature	<input type="text"/>
3. Funding	Finance Committee (2 Days)	Administrative Fee	Waived
a. Enhance Grant		Total Fund Raised E5	<input type="text"/>
b. Designated Fund		Less Administrative Fee	Waived
		FRCS Enhance Grant	<input type="text"/>
		FRCS Designated Fund	<input type="text"/>
		<input type="text"/> Name / Date / Signature	<input type="text"/>
4. Approval	EXCO or Board (1)	Amount Approved	<input type="text"/>
		<input type="text"/> Name and Signature	<input type="text"/>

Form is subject to reviewed

FRCS-PP01102016cph