

Rotary Club of North Bay
Funding Request Application Process
for individuals and organizations

Complete funding application. Forms include:

- Consent to Release Information
- Rotary Children's Committee funding application (parent form)
- Health Professional recommendations in support of funding assistance

Send it in to:

Rotary Club of North Bay
Att: Children's Committee
Box 242
North Bay, ON, P1B 2H2

Children's Committee determine whether the funding fits within the committee's mandate.

- * Up to \$2500.00 can be allocated to program / services / assistance (such as camp fees, travel)
- * Up to \$5000.00 can be allocated to equipment.
- * Individual or family funding is capped at \$5000 / year
- * Computers, orthotics, orthodontics and dental are not fundable.
- * Requests must include support by a health care professional as well as a completed Consent to Release information form.

Children's Committee reviews the application and follows up with the applicant or agency as necessary including when a decision has been made.

The family and/or organization is notified regarding the decision made by the committee.

Please note: Family income may be a factor in determining the amount of funds provided for individual requests.

Rotary Club of North Bay
Children's Committee – Acknowledgement / Release

Thank you for your recent letter to the Rotary Club of North Bay requesting assistance. To help us make the most appropriate and beneficial decision on your behalf, please complete the following application and return it to us at your earliest convenience to:

Rotary Club of North Bay
ATTN: Children's Committee
Box 242
North Bay, ON
P1B 2H2

Should you need to speak directly with someone regarding the completion of this application detail, please contact the following Rotarian:

Rotarian: Gisele Lynch Telephone: 705-497-9043 E-Mail: lyngis@yahoo.ca

Note: In order to properly assess the information you submit, we may need to directly contact you or any of the caregivers you identify. Please sign the release, where indicated below, authorizing the individuals and / or organizations to release / discuss information with us on your behalf relevant to your application for assistance.

RELEASE

I hereby authorize the following individuals and / or organizations;

1. _____
2. _____
3. _____
4. _____

to be contacted by the Children's Committee of the Rotary Club of North Bay on our behalf, to freely and fully provide any information relevant to our application for assistance. I understand that all information will be kept completely confidential by the Rotary Club of North Bay.

(Signature of Parent / Guardian)

(Applicant's Name)

(Printed Name of Parent / Guardian)

(Date)

ROTARY CHILDREN'S COMMITTEE - FUNDING APPLICATION
(PLEASE PRINT WHEN COMPLETING THE FOLLOWING)

1. Date of application: _____
2. Contact person & relationship to applicant: _____
3. Name in full of Applicant (Intended recipient): _____
4. Address (street / apt. city, postal code): _____
5. Telephone number (home/work if appropriate). _____
6. Age: _____ Diagnosis: _____
7. What is the funding needed for and how will it benefit the recipient: (attach other info as appropriate):

8. What organization, if any, (and who) assessed the applicant and made the recommendation for this treatment or funding: (attach other info as appropriate ... i.e. a letter of support)

9. Did you apply for funding from other organizations and / or individuals? If yes, please list below:

<u>Organization / Individual Name</u>	<u>Specific Request Made</u>	<u>Request Result/Status</u>
A. _____	_____	_____
B. _____	_____	_____
C. _____	_____	_____

10. Does your insurance provide any funds for this request? _____ How much? _____

11. What is the total estimated cost involved: (attach quotes as appropriate) \$ _____

12. What amount of this project are you (your family) able to contribute? \$ _____

13. How long do you anticipate needing / using this equipment? _____

14. If appropriate, are you prepared to "re-cycle" or otherwise make available for re-use by others the proceeds of this project if it is no longer required? _____

15. Is there a lawsuit pending? Yes _____ No _____ If yes, upon obtaining funds from the legal proceeding, would you be willing to reimburse The Rotary Club? _____

16. Do you agree to the release of information/promotion of your project to the media if Rotary is able to support your request? (YES/NO)

Applicant's Signature _____ Date: _____

Thank you. Please mail to Rotary, Box 242, North Bay, ON P1B 2H2