WAUSAU EARLY BIRDS ROTARY CLUB #29175 GRANT APPLICATION

REQUESTOR: Name _____ _____ Date _____ Last, First, MI Organization Name Address ___ _____ State _____ Zip ______ City ___ E-mail ___ _____ Cell phone _____ _____ Home _____ Telephone: Work ____ Amount of Grant Request \$_____Expected date for completion of the program or activity ___ Describe the program or activity and what you hope to achieve: Specifically describe how your proposal meets the criteria of the Wausau Early Bird Rotary Club Grants Program? ☐ Proof of 501(c)(3) status is attached ☐ Budget for grant request is attached Signature and Title of Individual Submitting Request

You may contact Todd Hagedorn, Treasurer, Wausau Early Birds Rotary, for verification of receipt of your application by e-mail at: thagedorn@wipfli.com

WAUSAU EARLY BIRD ROTARY CLUB #29175 GRANT FINAL REPORT

Final Reports are due 60 days following the completion of the project, activity or experience.

Mail to: Todd Hagedorn Wausau Early Birds Rotary Club 11 Scott Street, Suite 400 Wausau, WI 54401

Or email: thagedorn@wipfli.com _____ Date ____ Name __ Last, First, MI Organization Name _____ City ______ State _____ Zip _____ E-mail _____ Work phone _____ Date(s) of program or activity: ___ What did you do? _____ What was the outcome? _____ What would you do differently next time?

Signature and Title of Individual Submitting Report