SUNRISE ROTARY CLUB

Nonprofit Agency Partnership Application

The Sunrise Rotary Club is committed to supporting local charitable organizations through structured quarterly partnerships. Selected organizations will have the opportunity to engage with our club and its members through various activities, including speaking engagements, volunteer days, collection drives, fundraising events, and newsletter features. Here's how to apply:

1. **Eligibility:** Your organization must be a registered non-profit serving the local community, with a clear mission that aligns with Rotary's values of service and community impact.
2. **Application Process:**
   * **Submit a Nomination:** Charitable organizations can be nominated by club members or submit a direct application. The application information requested includes:
     + Organization name, mission, and primary services.
     + Specific needs or challenges the organization hopes to address through this partnership.
     + Potential volunteer activities or service projects that Sunrise Rotary club members could participate in.
     + Any upcoming events or initiatives where our support would be helpful.
3. **Review Process:** The Sunrise Rotary Club Board of Directors will review all applications and select one organization per quarter based on alignment with club priorities and logistical feasibility.
4. **Engagement Opportunities:**
   * Speaking Engagement at a Club Meeting
   * Volunteer Service Day
   * Collection Drive for Specific Needs
   * Charitable Giving Support (separate application and process for approval)
   * Fundraising Social Event Benefiting the Organization
   * Feature in the Sunrise Rotary Newsletter
5. **Deadlines:** Applications are reviewed on a rolling basis. Please submit your application to be considered for the upcoming quarter. The quarters are January-March, April-June, July-September, and October-December each year. Applications will be approved the month before the quarter begins.

## APPLICATION FOR PARTICIPATION

Thank you for your interest in partnering with the Sunrise Rotary Club. Please complete the form below to provide details about your organization and how we can best support your mission. Applications will be reviewed, and selected organizations will be contacted regarding next steps.

Name of Organization:

Mailing Address: Zip \_\_\_

Agency Telephone Number:

Contact Person: Title:

Telephone Number: E-Mail:

Web Address:

Mission of Organization:

Are you registered with the United States Department of the Treasury and recognized as a

501(c)(3) entity or the equivalent by the United States Internal Revenue Service?

YES \_\_\_\_\_ NO \_\_\_\_\_ Tax Exempt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If NO, please explain.

Are you registered with the Florida Department of Agriculture and Consumer Affairs, Division of

Consumer Services, in accordance with Chapter 496, Florida Statutes?

YES \_\_\_\_\_ NO \_\_\_\_\_ EXEMPT \_\_\_\_\_ Registration #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Organizations claiming exemption from the provisions of Chapter 496, Florida Statutes, must provide documentation supporting the exemption.*

Do you have a recognized, ongoing, and substantial community impact program directly

benefiting the Alachua County region.

YES \_\_\_\_\_ NO \_\_\_\_\_

**Areas of Impact:**

* Primary Service Area (e.g., education, healthcare, hunger relief, etc.):
* Who Do You Serve? (e.g., specific populations, age groups, etc.):
* What is your greatest need at this time?

**Engagement Opportunities**

Please provide details about how the Sunrise Rotary Club can engage with your organization in the following ways:

* **Speaking Engagement:**
  + Who would speak at our club meeting, and what key topics would you like to address?
  + Suggested Month for Speaking Engagement:
* **Volunteer Service Day:**
  + Describe potential volunteer activities Rotary Club members could participate in (e.g., sorting donations, meal service, event assistance, etc.):
  + Suggested Month for Service Day:
* **Collection Drive:**
  + What specific items does your organization need that our club could collect?
  + Are there any seasonal or time-sensitive needs? (e.g., back-to-school supplies, holiday gifts, etc.)
* **Fundraising Social Event:**
  + Do you have any ideas or suggestions for a fundraising event our club could host to benefit your organization? (e.g., dinner, trivia night, silent auction)
  + Suggested Month for Fundraising Event:

**Newsletter Feature**

* Provide a brief summary (150 words or less), photos of your organization, and logo to be featured in our club’s weekly newsletter, including key events or volunteer opportunities:

**Social Media Engagement**

* Provide links to your social media accounts that we can engage with, please also follow our Rotary club on Facebook <https://www.facebook.com/gainesvillesunriserotary>

**Additional Information**

* Are there any other ways our Rotary Club could support your organization?

**Submission Details**

* Please email your completed application to Karen Thomas at [k.thomas@ufl.edu](mailto:k.thomas@ufl.edu)
* If you have any questions, feel free to contact Karen via email or phone at 352-262-0885.

Thank you for applying! We look forward to reviewing your submission and considering your organization for our Charitable Partnership Program.