



## District Grant Application

<b>Rotary Club of:</b> San Clemente	<b>Date:</b> 07/12/2019
<b>Project Name/Title:</b> School Based Mental Health	
<b>Project Leader Name:</b> Lori Donchak	<b>Phone #:</b> 949-545-8970
<b>Project Leader Email:</b> loridonchak@gmail.com	

**1. Please provide a brief description of the project, and indicate the project beneficiaries (who is being served?):**

The Rotary Club of San Clemente will partner with The Wellness & Prevention Center San Clemente (<https://wpc-oc.org/> ) which helps youth and families lead healthy and productive lives by providing school based bilingual therapeutic services, education, access to health services and healthy activities for our youth and families that address the social and emotional needs of our youth and helps keep our community safe. Rotarians and staff and volunteers of the Center seek with the aid of a Mental Health Clinician to provide counseling for up to thirty students with phase of life issues including anxiety and depression, two seminars for parents with a normally average attendance of thirty-five parents per seminar and three vaping intervention sessions that normally addresses up to

**2. Indicate the project start and end dates:** *(The project may not begin prior to the district receiving approval from TRF. Reimbursements for earlier expenses are not eligible. Projects must have an end date no later than the end of the Rotary year.)*

Project start date:	September 2019
Project end date:	May 2020

**3. Project location (select one):**     **Community**     **Mexico**  
*(If the project is in Mexico, will there be a Rotary club from Mexico involved in the project? If so, indicate the name of the Rotary club and explain the members' involvement.)*

N/A

**4. List the project funding amounts** *(Club contribution must be equal to or greater than the amount requested from the district):*

Club contribution:	\$	1,000
District DDF (amount requested from district):	\$	1,000
Other participating clubs - list club name(s) and contribution amount(s) below:		
	\$	
	\$	
<b>Grant Project - Total</b>	<b>\$</b>	<b>2,000</b>



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5. **Indicate whether there is other involvement and financial support** *(If non-Rotary organizations will be involved in your club project, please describe the involvement and any financial support you are receiving for the project – for example, in-kind contributions, discounts, cash donations):*

N/A

6. **Describe the participation of club members** *(Your club members must be actively involved in this project. Please indicate how many members of your club will participate in this project and describe their activities):*

Attendance at workshops and seminars. Administrative support to school staff.

7. **Describe how funds will be safeguarded and tracked** *(If funds are to be distributed to a partner in Mexico who will be responsible for the funds? How will transfers of funds to Mexico be handled?):*

Funding monitored by Club Treasurer and disbursements approved by Club Board.

8. **Describe how your club will use the project funds (list the types of expenses / items to be purchased):**

Workshop and Seminar communications and administrative support to include distribution of educational materials to parents.