

APPLICANT: \_\_\_\_\_  
 REQUESTING ORGANIZATION NAME: \_\_\_\_\_  
 EVENT NAME: \_\_\_\_\_  
 EVENT DATE (S): \_\_\_\_\_  
 TELEPHONE: HOME ( ) \_\_\_\_\_ CELL ( ) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 INITIAL APPLICATION INQUIRY DATE: \_\_\_\_\_

**GENERAL PROJECT FILE**

ACTIVITY DESCRIPTION	DATE REQUESTED	DATE RECEIVED/COMPLETED	COMMENTS
<b>APPLICATION CHECKLIST</b>			
Completed Pre-Screening Application			
Pre-Screening Application Reviewed by Marketing/Event Grant Committee <b>for approval or denial</b>			
Completed Application & Supporting Documents			
Completed Application & Supporting Documents Reviewed by Marketing/Event Grant Committee			
Received Scored Rubrics from Marketing/Events Grant Committee			
<b>Marketing/Event Grant Committee Meeting to determine approval or denial of grant application</b>			
Presented for Approval to the Rock Falls Tourism Committee			
<b>Notification of approval or denial of grant application</b>			
Check Request Submitted to City of Rock Falls to approved grant applicant			
Check & Congratulatory letter sent to approved grant recipient			
Denial Letter sent to grant applicant that was not approved			
<b>POST-EVENT CHECKLIST</b>			
Completed Event Summary Form & Supporting Documents			
Sign and/or banners returned to Rock Falls Tourism Office			
<b>Print and/or digital copies of the project, promotional material, marketing (i.e. brochure, advertisement, etc.)</b>			
Event tracking data received			
Digital Copies or Photos showing proof of performance			