# The Rotary Foundation

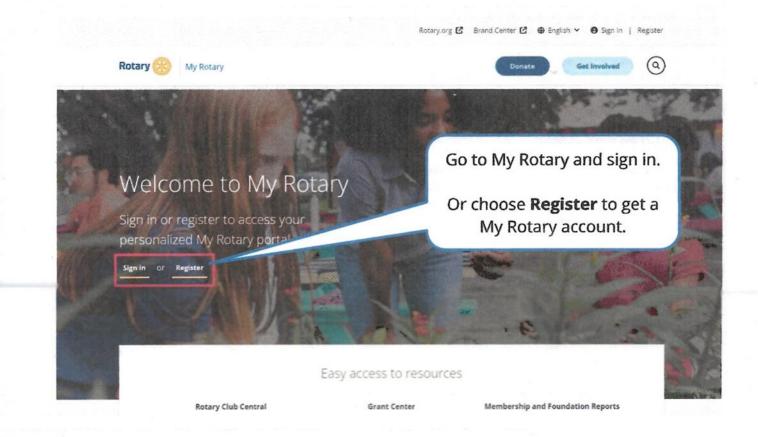




# การสมัครโครงการทุนสนับสนุนระดับโลก

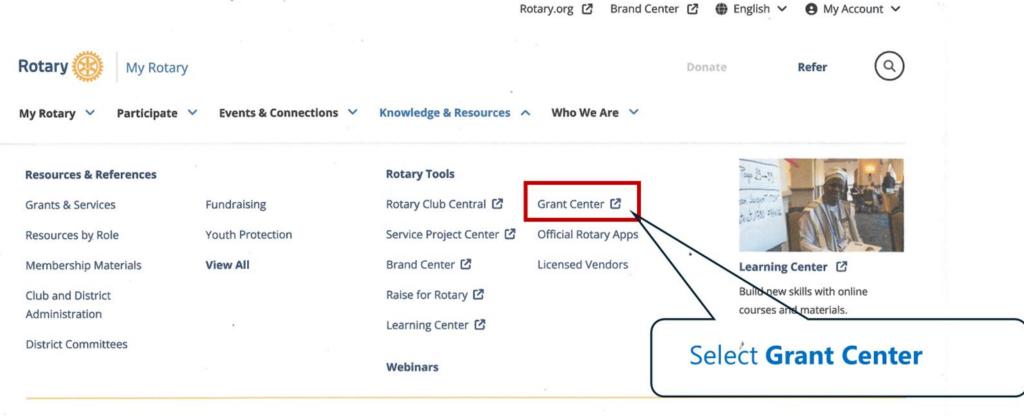
Global Grant Application

# **SIGN INTO YOUR MY ROTARY ACCOUNT**





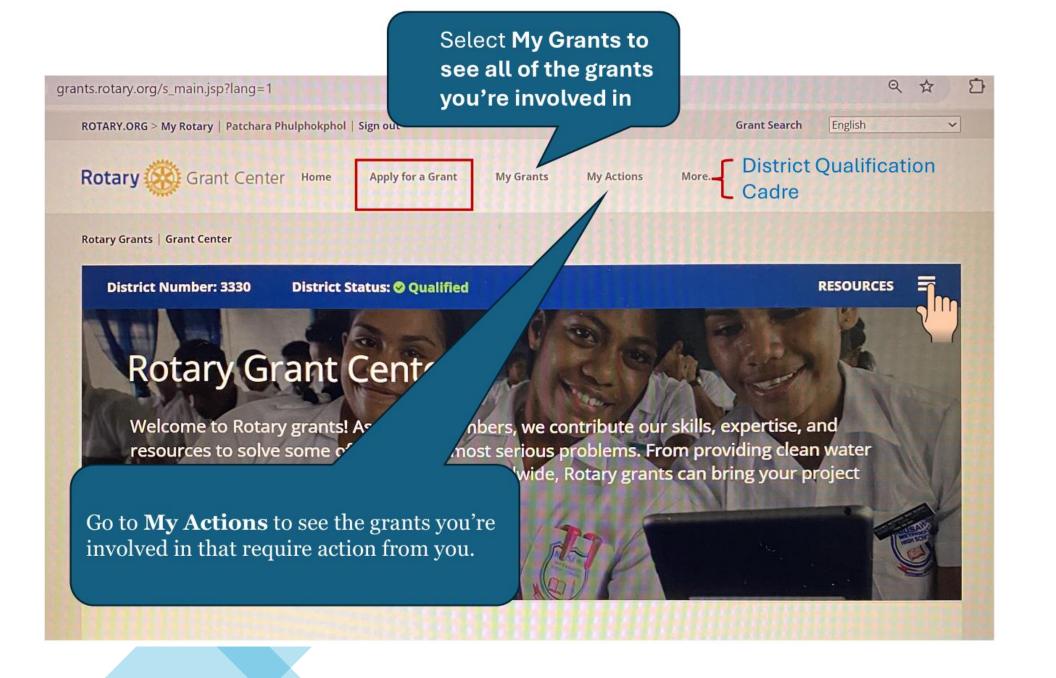
You can also go to rotary.org/clubcentral to reach the site directly. You'll be prompted to sign in to My Rotary or create an account if you haven't already.





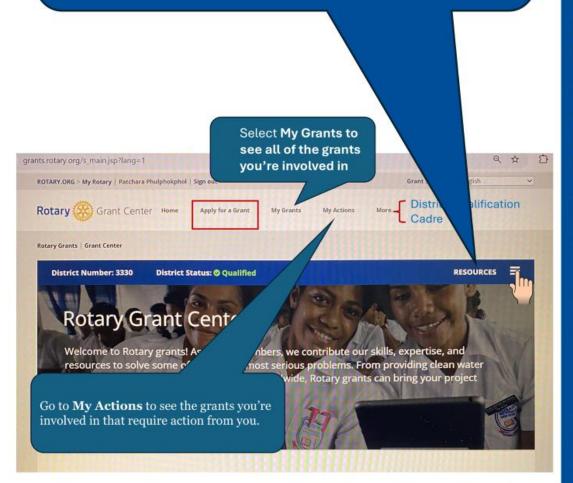






#### **GRANT RESOURCES**

Questions about the grant process? We're here to help, from getting you started to final steps.



<u>Application Supplement for Microcredit Projects</u>

**Areas of Focus Policy Statements** 

Community Assessment Results

Cooperating Organization Memorandum of Understanding

**Global Grant Application Template** 

Global Grant Calculator

Global Grant Lifecycle

Global Grant Monitoring and Evaluation Plan Supplement

Global Grant Report Template

Global Grant Scholarship Supplement

**Grant Travel** 

Guide to Global Grants

Guidelines for Rotary Foundation-Funded Project Signage

How to Use the Grant Center

Report Supplement for Microcredit Projects

RI Exchange Rates

Rotary Grants Staff Contact Sheet

Six Steps to Sustainability

Terms and Conditions for Rotary Foundation Global Grants

Terms and Conditions for Rotary Foundation District Grants

**Training Plan for Global Grants** 

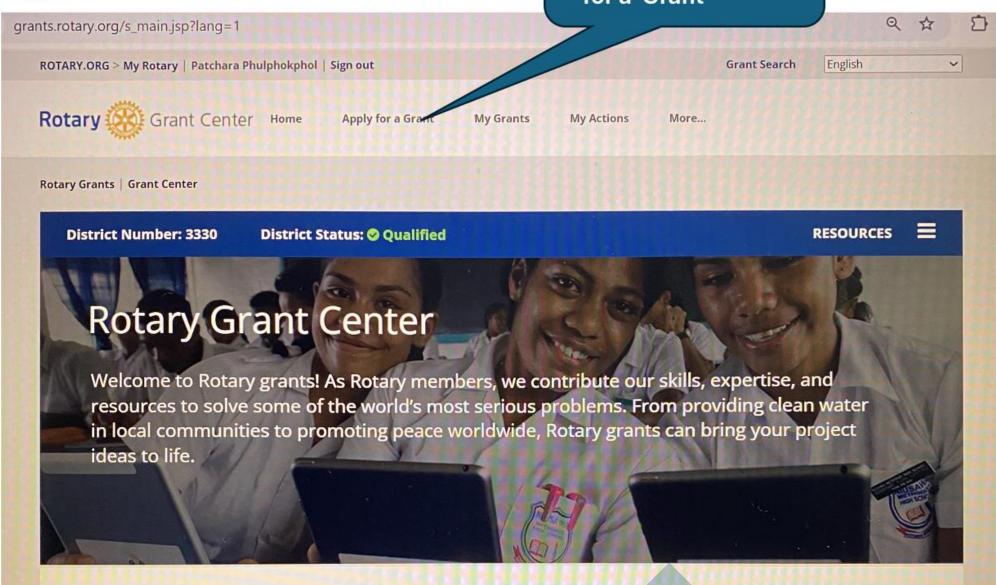
Vocational Training Team Itinerary

Vocational Training Team Member Application

Returning Grant Funds to The Rotary Foundation



To start the Global Grant, go to Apply for a Grant



# **Apply Now**

Programs of Scale Grant

Begin the grant application only after your club or district and partners have finalized the project plan and you've contacted your district about your project's need for funding. Answer every question clearly and concisely. Your regional grants officer will work with you to make any changes your application needs in order to meet grant criteria.







# Global Grant Application

All fields are required unless noted as "optional".

#### Step I Basic nformation

Enter some basic information, and then we'll give your application a number.

What's the name of your project?

AAAAAAAA

89/100 characters

#### What type of project are you planning?

Check all that apply. This will tell us what else we need to ask you.



#### A humanitarian project

Address community needs and produce sustainable, measurable outcomes

Vocational training

Build skills within a community by supporting a team of professionals that will travel abroad to train or learn from colleagues in the community they visit

☐ A scholarship

Fund international graduate-level study by someone seeking a career within an area of focus

#### **GRANT INFORMATION**

**GRANT NUMBER** 

**GCXXXXXXX** 

**GRANT STATUS** 

Draft

LAST ACTIVITY

#### **AUTO-SUBMIT**

Once the last authorization is given, the application will automatically be submitted to The Rotary Foundation. If automatic submission is off, the primary contact will receive a request to return to the application and manually submit the application to the Foundation.

Auto-submit is ON

Save & exit application

Print application (PDF)



89/100 characters

#### What type of project are you planning?

Check all that apply. This will tell us what else we need to ask you.



#### A humanitarian project

Address community needs and produce sustainable, measurable outcomes

#### □ Vocational training

Build skills within a community by supporting a team of professionals that will travel abroad to train or learn from colleagues in the community they visit

#### ☐ A scholarship

Fund international graduate-level study by someone seeking a career within an area of focus

#### Select the primary host and international contacts for this project.

Name	Club	District	Sponsor	Role
Pat P.	Leung Krabi	3330	Club	Host
Mr. A	Good	1234	Club	International
Add Primary Contact	Notify Primary Cor	ntact		

Switch host, international contacts, and committees.

Save & Continue

Save

Exit

#### AUTO-SUBMIT

Once the last authorization is given, the application will automatically be submitted to The Rotary Foundation. If automatic submission is off, the primary contact will receive a request to return to the application and manually submit the application to the Foundation.

Auto-submit is ON

Save & exit application

Print application (PDF)

Delete application

Step 2: Committee Members	•
Step 3: Project Overview	
Step 4: Areas of Focus	
Step 5: Measuring Success	
Step 6: Location and Dates	
Step 7: Participants	
Step 8: Budget	
Step 9: Funding	
Step 10: Sustainability	
Supporting Documents 🗸	1

Rotary Grants | Grant Center

Rotary !

**District Number: 3330** 

**District Status: Qualified** 

**RESOURCES** 



# **Rotary Grant Center**

Welcome to Rotary grants! As Rotary members, we contribute our skills, expertise, and resources to solve some of the world's most serious problems. From providing clean water in local communities to promoting peace worldwide, Rotary grants can bring your project ideas to life.

**District Number: 3330** 

**District Status: Qualified** 

RESOURCES



# Global Grant Application

Increasing Efficiency for the Emergency Unit at Klongtom Hospital

Ready to report?

Grant reporting is available once a project has been funded.

Q Go to reports page

All fields are required unless noted as "optional".

Step 1: Basic Information

**GRANT INFORMATION** 

**GRANT NUMBER** 

GG2456423

**GRANT STATUS** 

Approved

LAST ACTIVITY

15/05/2025

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Print application (PDF)

#### Step 1: Basic Information

Enter some basic information, and then we'll give your application a number.

#### What's the name of your project?

Increasing Efficiency for the Emergency Unit at Klongtom Hospital

35/100 characters

#### What type of project are you planning?

Check all that apply. This will tell us what else we need to ask you.



#### A humanitarian project

Address community needs and produce sustainable, measurable outcomes

#### Vocational training

Build skills within a community by supporting a team of professionals that will travel abroad to train or learn from colleagues in the community they visit

#### A scholarship

Fund international graduate-level study by someone seeking a career within an area of focus

#### Select the primary host and international contacts for this project.



Name	Club	District	Sponsor	Role
Sachet Eosrithongkul	Krabi	3330	Rotary Club	Host
Yong Yi Yi	Ilsan Jayuro	3690	Rotary Club	International

#### Step 1: Basic Information 🗸

#### Step 2: Committee Members ✓

#### Who will serve on the grant's Host committee?

Name	Club	District	Role
Nontawan Engchuan	Krabi [ Rotary Club ]	3330	Secondary Contact
Tanitachom Boonrungskulkaew	Krabi [ Rotary Club ]	3330	Secondary Contact

#### Who will serve on the grant's International committee?



Name	Club	District	Role
Myeong Soo Park	llsan Jayuro [ Rotary Club ]	3690	Secondary Contact International
Jong-Young Kim	llsan Jayuro [ Rotary Club ]	3690	Secondary Contact International

#### Do any of these committee members have potential conflicts of interest?

C

A conflict of interest occurs when someone is in a position to make or influence a decision about a grant or award that could benefit them, their family, their business, or an entity in which they serve in a paid or voluntary leadership or advisory position.

No Yes

If so, please briefly explain.

All fields are required unless noted as "optional".

Step 1: Basic Information < Step 2: Committee Members 🗸 Step 3: Project Overview 🗸

Tell us a little about your project. What are the main objectives of the project, and who will benefit from it? ?

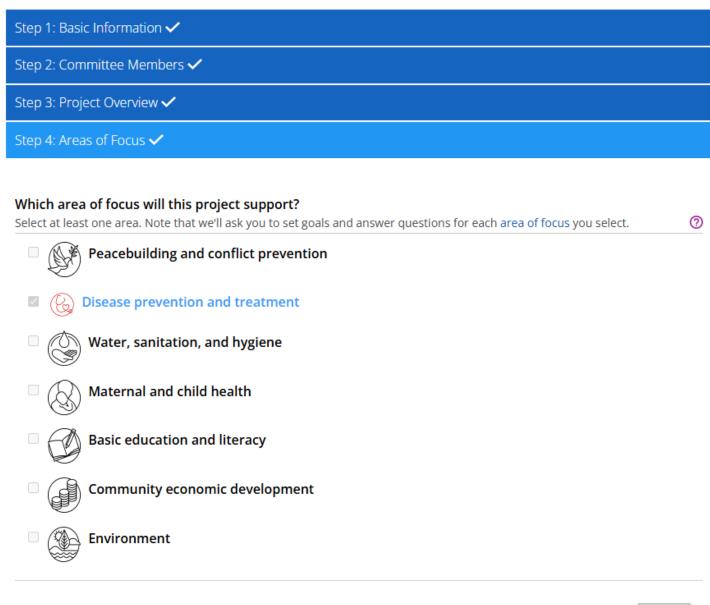
We're only asking for a general idea of the project. Try to be as concise as possible here. We'll ask you for details later in the application.

Since Klongtom District, Krabi Province, is a big District located between 2 Districts which are Lanta District and Lumtup District, also being a main junction to Krabi City. Regarding to the population, the population of Lanta District is 31,000, Lumtab District is 22,000 and Klongtom District is 72,000, with overall is 125,000 population.

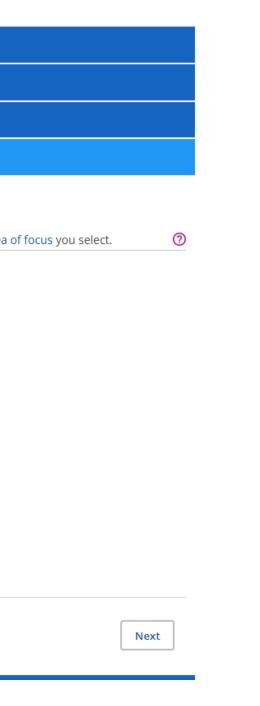








Exit Next



# Step 5: Measuring Success ✓

#### DISEASE PREVENTION AND TREATMENT

### Which goals of this area of focus will your project support?

Select all that apply. We'll ask you questions about the goals you choose, and at the end of the project, you'll report on your results for each goal.



- Improving the capacity of local health care professionals
- Promoting disease prevention and treatment programs that limit the spread of communicable diseases and reduce the incidence and effect of noncommunicable diseases
- Strengthening health care systems
- Providing clinical treatment and rehabilitation for physical disabilities
- Funding graduate scholarships for career-minded professionals related to disease prevention and treatment

How will you measure your project's impact? Find tips and information on how to measure results in the Global Grant Monitoring and Evaluation Plan Supplement. You need to include at least one standardized measure from the drop-down menu as part of your application.

	· · ·		
Measure	Collection method	Frequency	Beneficiaries
Number of medical and health professio	Focus groups/intervi	Every six months	20-49
Number of communities reporting decre	Direct observation	Every six months	100-499
Number of individuals reporting better q	Direct observation	Every six months	100-499
Number of health facilities benefiting	Direct observation	Every six months	100-499
Number of communities reporting an in	Direct observation	Every three months	Added on Rep
Number of health educational campaigns	Public records	Every month	Added on Rep

#### Do you know who will collect information for monitoring and evaluation?

Yes
No

#### Name of Individual or Organization

Klongtom Hospital

#### Briefly explain why this person or organization is qualified for this task.

Since the Klongtom Hospital is the District Hospital, also it is the main responsibility to taking care of patients together with the statistic and survey collection in every six months.

Exit Next

# Step 6: Location and Dates 🗸

## **HUMANITARIAN PROJECT**

Where will your project take place?

# City or town Province or state *(optional)* Klongtom Krabi Country Thailand When will your project take place? End date Start date 25/12/2023 31/03/2024 Exit Next

#### Step 7: Participants ✓

#### COOPERATING ORGANIZATIONS (OPTIONAL)



Name	Website	Location	
Klongtom Hospital		79 Moo 9, Klongtom Tai Subdistrict, Klon	1 🗓

#### Do any committee members have a potential conflict of interest related to a cooperating organization?

○ Yes ○ No

#### Why did you choose to partner with this organization and what will its role be?

As the location of Klongtom Hospital, there are many trauma cases. There is over than 50 percent from another district, especially in the emergency room (ER). The operation at the ER is to investigate the condition of patients, then give the treatment or refer to the Krabi Hospital, which is the general provincial hospital, in case of over level.

#### PARTNERS (OPTIONAL)

# List any other partners that will participate in this project.

2) Aoluk Rotary Club,

- District 3690;
- 3) Sae-Goyang Rotary Club

#### **VOLUNTEER TRAVELERS (OPTIONAL)**

A grant for a humanitarian project can pay for travel for up to two people who will provide training or help implement the project if the necessary skills are not available locally. Upload a CV for each volunteer traveler. Do not include sensitive personal data, such as government ID numbers, religion, race, health information, etc. You are responsible for informing volunteer travelers of the personal data you have provided about him/her to Rotary and that it will be processed in accordance with Rotary's Privacy Policy.

Name Email

#### **ROTARY PARTICIPANTS**

Describe the roles and responsibilities that the host and international sponsors will have in this project. Please be specific. Which sponsor will receive and manage the grant funds?

Arrange the community assessment and identify the needs with the community. Coordinate with international partners and cooperating urig in project planning till obtaining the the approval. Consistently communicate with all concerned partices to ensure the fulfillment of their roles and responsibilities. Ensure the proper implementation and use of project fund. Monitor and evaluate the project outcomes

Describe how the partnership between the host and international sponsors was formed. What agreement have the sponsors made toward ensuring that the project will be implemented successfully? How will they manage any challenges that arise throughout the project?

Recommend the required process and activities to ensure the achievement of the project objectives. Follow up, evaluate and monitor the project outcomes. Visit the hospital to encourage them for the project achievement and sustainability.

Cta	n 0,	Bu	daat	- /
ole:	υo.	DUI	ושענו	_

#### What local currency are you using in your project's budget?

The currency you select should be what you use for a majority of the project's expenses.

@

#### Local Currency

U.S. dollar (USD) exchange rate

THB 🗸

34

Saved on 15/11/2023

#### What is the budget for this grant?

List each item in your project's budget. Remember that the project's total budget must equal its total funding, which will be calculated in step 9. Project budgets, including the World Fund match, must be at least 30,000 USD.

Cost in Cost in Category Description Supplier THB USD Equipment Central Monitor + 4 Para... Prime Medical Co., Ltd. 900000 26471 Hy Flo, Nasal Canular Equipment Spiro-Med Co., Ltd. 200000 5882 Three training Course for... Training Various 73070 2149 3 Project manageme... Contigency Rate 76090 2238 4 Various Total budget: 1249160 36740

# How much World Fund money would you like to use on this project?

?

You may request up to 14,400.00 USD from the World Fund.

14400

# **Funding summary**

@

DDF contributions: 18,000.00

Cash contributions: 4,340.00

World Fund: 14,400.00

Total funding: 36,740.00

Total budget: 36,740.00

#### Step 10: Sustainability 🗸

Sustainable projects provide long-term solutions to community problems — solutions that community members themselves can support after grant funding ends. Your answers to the questions below will help us understand the components of your project that will make it sustainable.

**HUMANITARIAN PROJECTS** 

#### **Project planning**

#### Describe the community needs that your project will address.

It is difficult to increase the number of medical professionals due to the government policy, but we can increase healthcare personals' competency and Proper Medical Equipment. By providing the appropriate medical equipment can substitute the work process of healthcare personal.

From the assessment, we found that the hospital lack of Proper medical equipment, therefore we will provide two main equipment;

- 1. Central Monitor for detect vital Sign regularly as needed.
- 2. Hy Flo Respiratory Support for increasing oxygenation in severe respiratory disease.

#### How did your project team identify these needs?

We have the meeting survey with all management personal in Klongtom Hospital. Then we organized two focus groups, which are doctors, nurses taking care of critical patients. Also we made the 152 general surveys by questionnaires with the villagers, health volunteers, patients, patient's relatives and general people.

# How were members of the benefiting community involved in finding solutions?

We organized two focus groups, which are one group of doctors, three groups of nurses taking care of critical patients. Also we made the 152 general surveys by questionnaires with the village health volunteers, patients, patient's relatives and general people who had experience about the emergency room.

# How were community members involved in planning the project?

The hospital management and Rotarians has the meeting to set the project objectives, involve in community assessment, implementation plan, identifying required equipment, drafting the training programs.

#### **Project implementation**

#### Summarize each step of your project's implementation.

Do not include sensitive personal data, such as government ID numbers, religion, race, health information, etc. If you include personal data, you are responsible for informing those whose personal data is included that you are providing it to Rotary and that it will be processed in accordance with Rotary's Privacy Policy.

# Activity	Duration	
1 Set up Project commitee	2 weeks	
2 Plan and conduct community assessme	ent 2 weeks	
3 Discuss and set the project objectives a	nd scope 1 week	
4 Meeting, acquiring all necerrary informa	ation for project application 3 Months	
5 Equipment procurement and receiving	1 Month	
6 Training	2 Months	
7 Monitoring and eveluation	5 Months	

Will you work in coordination with any related initiatives in the community?	<b>②</b>
⊚ Yes ○ No	
Briefly describe the other initiatives and how they relate to this project.  N/A	

Please describe the training, community outreach, or educational programs this project will include.

#### Training 1

- Workshop on taking care of patients with Non Cummucable Disease and Accidental Prevention and Treatment for Health Personal

#### Training 2

- Workshop on Preventing Non Cummucable Disease and Accidental Prevention, and How to Decrease Complication and Severity for Community

#### Training 3

- Workshop on how to use the Central Monitor and Parameters, Hy Flo and Nasal Canular

#### How were these needs identified?

People have already well aware about Non Commucable disease and Accidental Prevention. However, the proper equipment is not enough for the critical patients. Also, the intensive knowledge of prevention to the community is still very important. Moreover, the health providers should continually update the knowledge about disease and equipment for the full potential of use.

What incentives (for example, monetary compensation, awards, certification, or publicity), will you use, if any, to encourage community members to participate in the project?

Certifatate for the participants.

List any community members or community groups that will oversee the continuation of the project aft grant-funded activities conclude.	er ⑦
Hospital management and Chief of Emergency Unit will oversee the continuation of the project. After the warranty, Klongtom Hospital will set the budget of maintenance of equipment and provide the continual training to all party concerned.	
	1.
BUDGET	
Nill you purchase budget items from local vendors?	
● Yes ○ No	
Explain the process you used to select vendors.	
We shall acquire the quotation of similar equipment from 3 suppliers. Rotarian team will be responsible to negotiate the price. The select the supplier by considering the reasonable price, terms and conditions, reputation of the supplier, i.e. after sale service etc. One of Rotarian who is the medical doctor will be part the receiving team.	
	1.
Did you use competitive bidding to select vendors?	

# Please explain. No bidding. Only acquire and negotiate the price and terms from 3 suppliers. Do any committee members have a potential conflict of interest related to a vendor? ○ Yes ○ No Please provide an operations and maintenance plan for the equipment or materials you anticipate purchasing for this project. This plan should include who will operate and maintain the equipment and how they will be trained. There is the training for using the equipment for the full potential of use. The supplier will organize the training programs on how to use and maintain the equipment to the responsible personnel. Describe how community members will maintain the equipment after grant-funded activities conclude. Will replacement parts be available? After the warranty, Klongtom Hospital will set the budget of maintenance of equipment. Also the equipment will be purchased from the local supplier, therefore, the spare parts will be available.

● Yes ○ No	
Please explain.	
We choose the reliable and repu community's technology standar	table supplier, so the equipment will be appropriate and conform to the ds.
	ho will own the items purchased by grant funds? No items may be owned
by a district, club, or member.	
	to the Klongtom Hospital.
by a district, club, or member.  The equipment will be belonged	to the Klongtom Hospital.
by a district, club, or member.  The equipment will be belonged	to the Klongtom Hospital.
by a district, club, or member.  The equipment will be belonged	to the Klongtom Hospital.
by a district, club, or member.  The equipment will be belonged	to the Klongtom Hospital.

Please describe this funding source.		
After the Grant is completed, the funding source will be from the government.		
		1.
Will any part of the project generate income for ongoing project funding? If yes, please explain.		
No		
		11
Exit	Next	
Supporting Documents ✓		1

#### Step 11: Review and Lock

Now that you've answered all the questions, it's time to finalize the application.



#### **REVIEW & LOCK APPLICATION**



#### Review

It's important to do a thorough review of the answers to make sure all the information is complete and accurate before it's sent to authorizers. It's helpful to print the full view of the application to review each step.

View application as a printable PDF

#### **Lock Application**



Locking the application will change its status from "Draft" to "Authorizations Required" and will be read-only to authorizers. District and club leaders who need to authorize the application will receive an email prompting them to do so. Once all authorizations are completed, the application is submitted to The Rotary Foundation for review.

To make any changes or corrections, project planners or authorizers will need to unlock the application first.



Continue

Exit

Next

#### Step 12: Authorizations

#### YOUR AUTHORIZATIONS & LEGAL AGREEMENTS

Authorization

Getting your grant application authorized is the last step before submitting it to The Rotary Foundation. Review the informatior that has been entered in each step and then give your authorization below. Depending on your role, you may need to authorize the application more than once.

When you locked the application in step 11, an email was sent to club or district leaders who also need to authorize your application. In this step, you can see which of them have done so.

#### ALL AUTHORIZATIONS & LEGAL AGREEMENTS SUMMARY

#### Primary contact authorizations

Name	Club	District	Status	
Sachet Eosrithongkul	Krabi [ Rotary Club ]	3330	Authorized	Authorized on 30/11
Yong Yi Yi	llsan Jayuro [ Rotary Club ]	3690	Authorized	Authorized on 15/11

#### District Rotary Foundation chair authorization

Name	Club	District	Status	
Patchara Phulphokp	Leung Krabi [ Rotary Club ]	3330	Authorized	Authorized on 01/12
Kyung Ha Lee	Sae-Bucheon [ Rotary Club ]	3690	Authorized	Authorized on 30/11

#### DDF authorization

Name	Club	District	Status	
Kyung Ha Lee	Sae-Bucheon [ Rotary Club ]	3690	Authorized	Authorized on 30/11
Dong-Seong Shin	llsan [ Rotary Club ]	3690	Authorized	Authorized on 30/11
Patchara Phulphokp	Leung Krabi [ Rotary Club ]	3330	Authorized	Authorized on 01/12
Chatchawal Telavanich	Samutsakhon [ Rotary Club ]	3330	Authorized	Authorized on 01/12

## Legal agreement

Name	Club	District	Status	
Pachara Wongnongtay	Krabi [ Rotary Club ]	3330	Accepted	Accepted on 01/12/
Yang Jae Yun	llsan Jayuro [ Rotary Club ]	3690	Accepted	Accepted on 15/11/

Exit