

**ST. JOSEPH PARISH GRANT FUND  
GRANT APPLICATION 2020**

Date: \_\_\_\_\_

Name of organization or group:

\_\_\_\_\_

Address: \_\_\_\_\_

Agency Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Chairperson of governing body: \_\_\_\_\_

Name and title of chief administrator or director: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ (\$5,000 Maximum)

Brief description of request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

General mission of organization/group/program including year of establishment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please submit copies of the following with this cover sheet:

1. Complete list of program or organization's officers and directors.
2. Actual income and expense statement from the last fiscal year.
3. Narrative describing project (respond to question on reverse side).

Submitted by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

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The form our application takes is far less important than the content, but your answers to the questions listed below should be ***no longer than three (3) typed pages***. In writing your proposal, please address the following:

1. **GOAL OF THE PROJECT:** What is your goal for this project? Why is it needed? What target population, if any, will be the focus of your project? How does this project fit into the mission of your organization?
2. **OBJECTIVES AND PROJECT NARRATIVE:** Specifically, what will you do? How will you do it?
3. **TIMETABLE:** Please provide a schedule of events, or timetable, for you project.
4. **EVALUATION:** What type of measurement, (qualitative quantitative, etc.) will you use to evaluate the outcomes of this project? How will you report the analysis of your outcomes? How will you document your outcomes in relationship to your project objectives?
5. **PROJECT BUDGET:** Please itemize all project costs (materials, equipment, services, supplies, etc.) and other sources of funding. Include information on any pending grant or funding requests. To whom have you applied? What is the current status of your request? When do you expect to hear about the outcome?
6. **FUTURE FUNDING:** How do you intend to continue this project after exhausting any funds provided by the St. Joseph Parish Grant Program?

***All applicants may share their ideas with the St. Joseph Grant Committee prior to submission of a formal application. Please contact Kathy Helf, 920-734-4025 or Deacon Mark Farrell, 920-734-7195, to set up an appointment.***

**Please submit applications by March 30th via e-mail to:**

**Father Jim Leary**

**Frjim@SaintJosephParish.org**

**Question can be directed to:**

Kathy Helf, Chairman of the Grant Committee – 920-734-4025

Deacon Mark Farrell – 920-734-7195