

St. George's Episcopal Church Outreach Grant Request Form

Submission Period:

period ending February 28
 period ending August 31

period ending May 31
 period ending November 30

Organization Name:

Street Address:

City:

State:

Zip:

Phone:

Fax:

Email Address:

Web address:

Contact Name and Title:

1. Employer Identification Number:

2. We are organized as

For-profit

Not-for-profit (tax exempt)

incorporated

unincorporated

Year of incorporation or, if unincorporated, year of founding:

If unincorporated, please identify how donors make payment to your organization:

3. Briefly describe your organization, the problems/issues addressed and the population served by it. Please attach a list of the members of your Board and of the officers and senior staff of the organization (if any).

4. What is the organization's total budget?

What percentage of the budget is expended on non-program salaries and administrative costs?

What are the organization's primary sources of financial support? (e.g., grants, membership dues, contributions from individuals and corporations, foundation grants, endowment (please do not feel the need to list the names of individual donors))

5. Are parishioners from St. George's Church currently actively involved with your organization? Please list the names, if known, and, if possible, an estimate of the total annual volunteer hours given by St. Georgian's over a year.

6. Amount requested from St. George's:

7. The grant being requested is for:
 General Support
 Specific Project or Program
 New
 Ongoing
 Special Event
 Emergency Funds
8. If this is a request for Emergency Funds, please explain the nature of the emergency and what these funds will be used for and skip to Section 14 below.
9. Describe the Project or Program for which you are requesting funds. Please be specific about the issue or problem to be addressed, the methods to be used in addressing the problem, the project's beneficiaries, and what results or effects are expected from the program. Please also discuss what measures will be used to determine the success or effectiveness of the program.
10. Total project budget:
11. Does this project have significant other financial and volunteer support? Please specify sources.
12. Does this project provide an opportunity for hands-on involvement by St. George's parishioners? If yes, please describe possible activities, number of participants and length of participation.
13. When do you expect that the project will be completed?

Signed: _____*

Print Name: _____ Date: _____

Title: _____

* If you are submitting this form by email, no signature is required at this time. If a grant is approved for your organization, we will need a signed copy of this application before funds can be disbursed.