

ST. THOMAS MORE PARISH MEMORIAL FUND

GRANT APPLICATION-20__

Date: _____

Name of organization or group:

Address: _____

Agency Phone/E-mail/Fax: _____

Chairperson of governing body: _____

Name and title of chief administrator or director: _____

Amount requested: \$ _____

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 past fiscal year.
3. Narrative describing project (respond to questions on reverse side).

Submitted by:

Signature

Title

Printed Name

Date

The form your application takes is far less important than its content, but your response 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 PROJECT:** What is your goal for this project? Why is it needed? What target population, if any, will be the focus for 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 your 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 STM Memorial Fund?

All applicants may share their ideas with the STM Memorial Fund prior to the submission of a formal application. Please contact Barb Tremel (920) 739-7758 if you would like to make an appointment.

Please direct all applications to:

Barb Tremel, Business Manager
St. Thomas More Parish
1810-B N. McDonald St.
Appleton, WI 54911
Phone (920) 739-7758
Fax (920) 749-3743
e-mail: barb@stmccath.org

Questions can be directed to:

Kim O'Brien
St. Thomas More Parish
Phone: (920) 470-2300
e-mail: kobrien@new.rr.com