

GOD'S WORK~OUR CHALLENGE ENDOWMENT FOR THE POOR
OFFICIAL GRANT APPLICATION FORM
 (ONLY APPLICATIONS SUBMITTED ON THIS FORM WILL BE ACCEPTED FOR CONSIDERATION)

1. Name of organization requesting funds _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ FAX _____

2. Contact Person _____
 Title _____ Phone _____
 E-Mail: _____

3. Amount Requested: _____
 Can you accomplish the purpose of your project with partial funding? _____

4. Describe your organization.

5. Please state your objectives and describe how this grant will be used to meet your objectives.

6. Provide a detailed budget for the project.

Total	

7. Please describe the constituency that is served by your organization.

8. Please list the amount and type of grant(s) received from the Diocese of Raleigh in the last two years.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

9. Please separately list the top five sources and amounts of funding for your organization.

1. _____ \$ _____
2. _____ \$ _____
3. _____ \$ _____
4. _____ \$ _____
5. _____ \$ _____

10. Preparer's Signature _____ Telephone _____

11. Date of Application _____

Notice to Preparer: If funding is approved, a Grantee Report on the use of the funds is required within nine months from receipt of funds. If not received, future funding requests will be denied.

Initial as read and understood _____

Pastor/Pastoral Administrator's Endorsement: *(It is the responsibility of the applicant to seek out the local Pastor/Pastoral Administrator for this Endorsement.)*

- _____ I endorse the applicant's efforts.
- _____ I do not endorse the applicant's efforts.
- _____ I decline to comment.

Comments: _____

Pastor/Pastoral Administrator Signature _____ *Date* _____

Financial Addendum Required for all Diocesan Grant Applications

(For Catholic Organizations)

List Amounts Deposited in the Following Accounts

Category	Parish Financial Information	School Financial Information (if applying for school)	
# of Registered Households			# of Students
Total Annual Offertory for most recently completed fiscal year.	\$	\$	Total Tuition
Total Annual Income for most recently completed fiscal year.	\$	\$	Amount Contributed by Parish
	\$	\$	Total Other Income
	\$	\$	Total All Income
	\$	\$	

	Checking Accounts	Checking Accounts	
General Checking Account	\$	\$	General Checking Account
Restricted Checking Account	List Purpose & Amount	List Purpose & Amount	Restricted Checking Account
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose
	Savings Accounts	Savings Accounts	
General Savings Account	\$	\$	General Savings Account
Restricted Savings Account	List Purpose & Amount	List Purpose & Amount	Restricted Savings Account
Building	\$	\$	Building
GWOC	\$	\$	Purpose
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose
Purpose	\$	\$	Purpose

Financial Addendum Required for all Diocesan Grant Applications

(For Non-Catholic Organizations)

List Amounts Deposited in the Following Accounts

	Budget	
Expenses		
Income		
Funds Received from Grants		
Total Income		

General Checking Accounts – List Amounts on Deposit

Amount	Purpose

Restricted Checking Accounts – List Amounts on Deposit

Amount	Purpose

General Savings Accounts – List Amounts on Deposit

Amount	Purpose

Restricted Savings Accounts – List Amounts on Deposit

Amount	Purpose