

## **General Grant Application Instructions:**

- Please provide all of the information in the order listed.
- If applicant is listed in the Diocesan Directory, please provide copy of page where applicant appears; if applicant is not listed in the Directory, provide copy of applicant's Internal Revenue Service determination letter, confirming that applicant is recognized by the IRS as a tax-exempt charitable organization.
- All questions relative to the request must be fully completed. Do not respond with just one or two sentences. The point of this application if for the Grant Committee to be able to understand your programs purpose and process. Please be clear and concise.
- Applicant must sign application; if request is parish based, pastor also must sign application.
- All grants are awarded on a one-time basis only. Though applicants may apply for a new grant each year, continual approval by the Catholic Foundation is not guaranteed.
- Submit application to the Catholic Foundation by mail, email, or fax.
- Do not include materials other than those specifically requested at this time.
- Do not send videotapes.

## **Grant Application Deadline:**

March 31, 2012

Kate Truong, Grant Administrator Catholic Foundation of Santa Clara County 777 N. First Street. **Suite 490** San Jose, CA 95112 Office: 408-995-5219 x 21

Fax: 408-995-5865
Email: truong@cfoscc.org



Application area (check one):

- o **Pastoral Ministry Training & Formation:** Faith formation programs or activities which help enhance the Catholic Faith in our community
- o **Parish Outreach:** Programs or activities which help address needs in our communities
- o **Parish Stewardship:** Programs or training to help parishes grow financial support for new or continuing activities

Project Title:		
Parish(es) Associated With		
Parish(es):		
Pastor:		
Address:		
City, ST, Zip:		
Phone:		
Website:		
Gra	nt Application Contacts	
Primary Contact:	Secondary Contact	
Name:	Name:	
Phone :	Phone:	
Email:	Email:	
Title:	Title:	
	ontained in this application is accurate and that the project, has my full endorsement (signature required if parish-	
Pastor's Signature:		
Associated Parish:		



1. Parish Mission Statement (or Program Mission Statement, if applicable):		
2. Request for Funding Statement:		
3. Describe the project, including activities and objectives. Give an estimate of their costs.		
5. Describe the project, including activities and objectives. Give an estimate of their costs.		



4. Is this a new program or a continuation of an existing project?  5. Have you applied for a grant from the Catholic Foundation before? If yes, in what year did you apply, what was the grant for, and, if awarded, what was the total dollar amount?		
7. If the amount requested is not equal to the to funding the remainder? Please indicate whether secured.		
8. If the amount awarded is less then the amoun continue with your program? Please explain. I awarded in order for your program to continue	Is there a minimum amount you must be	



9. What is the result you hope to achieve from this the project is successful? (150 words or less)	s project? How will you measure whether
Program Start Date:/	Program End Date://
<ul> <li>I agree to comply with any requests for pull</li> <li>I agree to submit an annual report to the forproject/program.</li> <li>I agree to inform the Foundation of any chedelay with the program/project in a timely</li> <li>I agree to reply to all communications from</li> </ul>	oundation, or upon completion of this anges in the activities or unanticipated manner.
Name of Applicant:Signature of Applicant:	

PLEASE NOTE: All applications must be submitted by 5:00 pm on March 31, 2012