Thanksgiving Offering

Grant Application

Return completed applications to Diocesan Council Member, Tim Shields at **tims@kodiakco.com** no later than **December 31, 2023.** Grants are made to the sponsoring mission or parish.

1. Name of sponsoring Parish/Mission:
2. Mailing Address:
3. Name of Contact Person for the Project:
4. Email Address:
5. Phone Number:
6. Name of Project:
7. Amount Requested ($500 limit per congregation):
8. Please write a description of the project for which the funds are requested. In your answer, please include: (a) the purpose of this project as it relates to those living in poverty and/or experiencing houselessness; (b) the number of congregation members who have hands-on involvement in this ministry; (c) your community partners
9. If this is a continuing program or project, please explain how you evaluate your program’s on-going effectiveness and any ways you have found opportunities to continue, change, or innovate, according to any changing needs?
10. Finance and Budget:
	* Total budget cost to this ministry project:
	* List of funding sources (include amount per source):
	* Other possible sources of funding:
	* The total amount of funding coming from your Parish/Mission:

Signature of Grant Author: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Clergy-in-Charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_