

# SHCJ Grant Application Form

(Note: While your email address may automatically populate here, be sure to add the email address in section two. Thank you.)

\* Indicates required question

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1. Email \*

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2. **GENERAL INFORMATION ABOUT ORGANIZATION \***

**Name of Organization Applying for A Grant:**

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3. **GENERAL INFORMATION ABOUT ORGANIZATION \***

Name of Organization Applying for A Grant:

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4. Organization's Telephone Number: \*

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5. Organization's Website Address, if applicable:

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## **PROJECT/PROGRAM CONTACT INFORMATION**

6. Name and Title of Contact: \*

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7. Organization's Street/Mailing Address: \*

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8. Contact Person's Email Address: \*

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9. Contact Person's Telephone Number  
(if different from above):

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10. Contact Person's Street/Mailing Address \*  
(if different from above):

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**RELATIONSHIP TO SOCIETY OF THE HOLY CHILD JESUS**

11. Name, contact information, and relationship of the person in the Society of the Holy Child Jesus acting as a reference: \*

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**PROJECT/PROGRAM DESCRIPTION**

12. Project/Program Title: \*

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13. Amount Requested: \*

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14. Make Check Payable to: \*

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15. Program/Project Budget (PDF file, please) \*

Files submitted:

16. Organizational Budget for One Year (PDF file, please) \*

Files submitted:

17. Project/Program Goals, Objectives, and Timeline (PDF file, please) \*

Files submitted:

18. Explanation of how Project/Program will be monitored and its outcomes measured. (PDF file, please) \*

Files submitted:

19. Attach a PDF file listing personnel (employees, volunteers, etc.) who will be responsible for the implementation of the goals and objectives of the Project/Program. \*

Please include their experience relative to achieving these goals/objectives.

Files submitted:

20. Attach a PDF file listing funding strategies and sources (foundations, constituent fundraising, organizational budget, etc.), in addition to an SHCJ Social Justice Grant, which will support the Project/Program. Please include a timeline and dollar amounts for this support. \*

Files submitted:

21. Please describe how this Project/Program will enhance the goals and objectives of your organization. \*

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22. List the demographic and geographic information regarding the community that will be served by this Project/Program: \*

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23. Please include the following documents (PDF files, please) with this application: \*

- A. An itemized Project/Program budget; and
- B. Documentation of Organization's 501(c)(3) nonprofit status, if applicable.

Files submitted:



