**SOCIETY OF THE SACRED HEART**

**DUCHESNE FUND FOR MINISTRY GRANT APPLICATION 2022**

To be considered for a grant from the Duchesne Fund for Ministry, please complete this form and return as an attachment to Lisa Terneus, [lterneus@rscj.org](mailto:lterneus@rscj.org) or by mail to 4120 Forest Park Ave., St. Louis, MO 63108 **by March 1, 2022.** Incomplete or late forms will not be considered.

**Date Application Received**: Click here to enter a date.

**Agency or Institution applying for a grant**: Click here to enter text.

**Mailing Address**: Click here to enter text.

**Phone:** Click here to enter text. **Email:** Click here to enter text.

**Please share a brief description of the agency or institution**: Click here to enter text.

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**Title of the Project:** Click here to enter text.

**Project Description:** Please give a short description of the project, describing the current need and how the project proposes to meet the need. Also include in your description the setting of the project (rural, urban or suburban) and the type of population served (women, children, young adults, migrants, refugees, and undocumented). Click here to enter text.

**Request for Funding**

\*Type of Grant Requested: Choose an item.

\*Maximum $10,000 for a **Start-up grant**

**\*\***Maximum $5,000 for an **On-going grant**

**\*\**Ongoing grant application*** *must include a* ***Progress Report*** *showing how the funds from the previous grant from the Duchesne Fund for ministry were used.*

**Grant Amount Requested**: Click here to enter text.

How many people will be directly served by this project**?** Click here to enter text.

What is the expected duration of this project?Click here to enter text.(months/years)

What other groups (if any) will collaborate on this project? Click here to enter text.

**Person(s) responsible for this project:** Click here to enter text. **Position:** Click here to enter text.

**RSCJ or Associate Endorser** (if necessary, see Guidelines #2): Click here to enter text.

(*Check if an endorser is needed)* I, the person responsible for this project, have contacted the RSCJ Endorser sent and discussed this proposal with her, and sent her the endorsement form to fill out and send directly to the Society of the Sacred Heart.

**Approval by head of agency or institution: Name:** Click here to enter text. **Position:** Click here to enter text.

**Project Objectives:** *Please describe the measurable objects for this project, including the educational component.* Click here to enter text.

**Evaluation Process:** *Please describe the progress benchmarks by which you will know the project has accomplished its purpose and who will be involved in the evaluation.*

**Final Report:** *A Final Report is required when the project has concluded and before a new grant request is submitted.*

**PROJECT BUDGET**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Income** |  |  | **Expenses** |  |
|  | **Amounts** |  |  | **Amounts** |
| Grants: Duchesne Fund |  |  | Personnel |  |
|  |  |  | Materials |  |
| Other Sources |  |  | Training |  |
| In Kind Contributions |  |  | Facilities |  |
|  |  |  | Other |  |
| **Total Income** | **0** | **Total Expenses** |  | 0 |

***Note: Total Income and Total Expenses must balance.***

**Plans for ongoing funding (**if necessary): Click here to enter text.

**Please attach evidence of the organization’s outside audit or the equivalent.** (If an audit is not required for your organization, please state the reason and attach financial statements showing income/expenses and assets/liabilities for the entire organization.)

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**Signature of Person Responsible for the Project**