

Trinity Episcopal Church

2024 Grant Application

*Trinity Episcopal Church embodies Christ's love by creating sacred community, sharing God's story, and welcoming and serving all people.
Our Core Values include Faithfulness, Inclusiveness, Worship,
Community, Service, Nurture and Stewardship.*

Instructions for Grant Application Submission:

- 1) Complete this entire application.
- 2) Questions may be emailed to Jackie Ferguson at jackie_ferguson@sbcglobal.net . Specify "TRO Grant Request Question" in the subject line.
- 3) Applications for 2024 funding must be received by Aug. 31, 2023.
- 4) Email completed applications and attachments to Jackie Ferguson at jackie_ferguson@sbcglobal.net

Organization Information:

Organization Name _____

Street Address _____

City, State, Zip Code _____

Phone Number _____

Email Address _____

Website Address _____

IRS EIN #: _____

Attach an electronic copy of your 501 c3 determination letter.

Grant Applicant Contact Information:

Name & Title _____

Phone Number _____

Email Address _____

Organization Overview:

Organization's Mission Statement:

Briefly describe the history, including original funding sources, and goals of the organization.

What does your organization do to encourage fellowship and bonding in your ministry?

What does your ministry do to promote a feeling of self-worth and connection with others?

List the major programs and activities of your organization.

Describe a few top accomplishments of your organization within the last 3 years. Include annual organization outcomes and or outcomes specific to the program for which you are requesting funding, if applicable.

Describe the geographic area and clientele served by your organization. How many participants does your organization serve? How many will be involved in this program?

What does your organization do to nurture the Christian faith in the people you serve in your ministry?

What does your organization do to ensure that your services are available to all eligible people?

Briefly describe how your organization partners with other organizations in the community.

List any Trinity members who are employees of your organization.

Financial:

What are your main sources of funding? List major grants you have received in the past year.

Attach electronic copies of your current overall operating budget, and your most recent 990 (EZ form if available).

Program Details:

Describe the program for which money is being requested. Be specific. Include description of groups served, timeline of program and desired outcome.

Submit the operating budget for this program. How much funding has been raised to date?

What \$ amount are you requesting from Trinity Episcopal Church?

When is the funding needed? Select one payment schedule option from list below:

___ Annually _____
(month)

___ Semi-Annually _____ and _____
(month) (month)

___ Quarterly _____, _____, _____ and _____
(month) (month) (month) (month)

Describe the desired measurable outcomes of this program. How do you intend to measure and report on the effectiveness of this program?

What volunteer opportunities (done-in-a-day or long-term) are needed to support this program?

Are you able to incorporate any kind of worship into your program?

Other:

Is there any additional information about your organization that would be helpful to us? (Attach electronic copies of additional relevant documents and brochures.)