2024 Episcopal Charities Annual Grant Application WORKSHEET

The grant application period: May 1 through June 30, 2024

These are the questions for our 2024 Grant Application which you may submit online only during the grant application period. Since the application must be completed in one online visit, we hope that this worksheet will make the application process work for you.

- 1. Name or Agency or Organization
- 2. Address of Agency/Organization
- 3. Name of Contact Person within your agency who can discuss this application.
- 4. Best Phone Number for Agency Contact Person
- 5. Email Address for Agency Contact Person

Tell us about your Project

- 6. Project/Program Name
- 7. Is this an existing or new Program/Project?
- 8. Our 2024 focus is to provide grants that address Basic Human Needs food, shelter, healthcare for at-risk children and at-risk seniors (adults 60+) Please choose the area that best fits your program/project. (Choose food, shelter or healthcare)
- 9. How will this grant be used to meet our focus? (See Question 8)
- 10. If you are providing food, are you a member of the Rhode Island Community Food Bank? Yes/No
- 11. How will you measure your project/program effectiveness?
- 12. Please describe the demographics of those served by your program/project. Enter the number of at-risk children and at-risk seniors below.
- 13. What are your goals for this program/project during this grant period?
- 14. Please describe your relationship with one or more Episcopal Churches in RI. Upload a letter of support from leaders of one of our Episcopal Churches. Your application will not be considered without it.
- 15. How much Episcopal Charities funding are you requesting?
- 16. Are others providing you funding for this program/project as well? If so, who and how much?
- 17. What is the full cost of this program/project? Please upload the budget for this program/project.
- 18. Please upload your agency/ministry Income Statement, including major sources of funding.

Tell us which supplementary files you uploaded below: Those with (*) are required to submit this application.

- Program/Project Budget*
- Agency Income Statement including sources of funding*
- Client stories we can share in publicity*
- Letter of support from your RI Episcopal Church partner*
- Certificate of current 501c3 status if not previously submitted.

Date