

GRANT APPLICATION
FRANCISCAN MISSIONARY UNION
HOLY NAME PROVINCE

Those who wish to apply for funding must be a qualified organization dedicated to the support of those in need and in alignment with the Mission and goals of Holy Name Province Franciscan Missionary Union (as stated in the Grant Criteria Document).

Fill out this cover sheet and send with your application as a Word Document or in PDF Format to Br. Paul O’Keeffe, OFM at pokeeffe@thefranciscans.org. Please place “GRANT APPLICATION” in the subject box of your email. Applications may also be sent in paper form to the following address:

Br. Paul O’Keeffe, OFM
Franciscan Missionary Union
Grant Advisory Board
100 Arch Street
Boston, Ma 02110-1111
USA

Legal Name of Organization: _____

Address: _____ Telephone: _____

_____ Email: _____

_____ Fax: _____

Name of Executive Director: _____

Contact person and title (if not same as above) _____

Has your organization received money from the FMU in the past? Yes _____ No _____

If you answered yes, please list the years that your organization has received financial assistance in the past including the amount of financial assistance/ or grant money received each year.

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Grant Proposal Format

The Application and Final Report must be accompanied by **Form 1: Project Information Summary** and be submitted as a Work Document or in PDF Format

I. PROPOSAL SUMMARY: One-half page, maximum

Please summarize in a short paragraph or two the purpose of your agency. Briefly explain why your organization is requesting this grant, what outcomes you hope to achieve should you be awarded a grant.

II. NARRATIVE – Two pages maximum

A. Background – Describe the work of your organization, addressing each of the following:

- A brief description of its history and mission
- The location and geographic area that it serves
- The need or problem that your organization works to address and the type of population you serve
- Current programs and accomplishments. Please emphasize the achievements of the recent past and provide information, if available, to document the quality of your endeavors (e.g. copies of letters of commendation, newspaper articles, etc.)
- The number of paid full-time staff, number of paid part-time staff, number of volunteers

B. Funding Request – Two page maximum, including the following items;

- A statement of its primary purpose and the need or problem that you are seeking to address
- The population that this project will serve and how they will benefit
- The goals for this project
- The strategies that you will employ to implement your project
- Any staff training that may be needed to help achieve your stated goals
- The anticipated length of the project and date of completion
- How the project will contribute to your organization's overall mission
- The total cost of the project

C. Evaluation – One page maximum, including the following items;

- Explain how your organization will measure the effectiveness of your project. Describe your criteria for achieving a successful program and the results you expect to have accomplished by the end of the funding period.

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III. **FINANCIAL STATEMENTS** – Fill out **Form 2: Parallel Funds Declaration** and **Form 3: Detailed Budget Worksheet**

IV. **FINAL REPORT**- No more than two pages, including the following items;

- A brief summary of the goals achieved in the project and the impact it had on the population served
- Video and/or photo documentation that the project has been executed (minimum of 5 pictures)
- A completed expense report showing how the funds were spent
(Form 5: Actual Expense Report)
- Include as a cover sheet **Form 1: Project Information Summary Form**

The Final Report and associated forms must be completed and submitted no later than one month after the specified date which the project is to be completed. Failure to submit these forms may result in an organization not being considered for future funding.

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