



2024 GRANT APPLICATION

Name of Organization:

Address:

Website:

Tax ID (EIN) Number:

Organization Budget Size:

Executive Director:

Telephone:

Email:

Grant contact and title:

Telephone:

Email:

Project Title:

Funding Request: \$

Brief Description of Project (maximum 100 words):

Grant applicants must provide one email copy of the following:

Completed application including signature page

- Project Narrative – see guidelines
- Project budget
- List of Board of Directors and affiliations
- Most recent IRS Form 990 (including all attachments)
- Most recent Audited Financial Statement (including notes)
- Most recent Monthly P & L
- Verification of IRS 501(c)(3)

I certify that the contents of this grant application are true and correct, adhere to the St. Germaine guidelines, and all attachments are included. I understand that if any of these documents are not included, our application will be considered incomplete and will not be reviewed. Grant requests must be received on or before **Wednesday February 7, 2024**. I understand that receipt of a grant from St. Germaine’s Children’s Charity in a calendar year excludes my organization from consideration the following calendar year. I also understand that should we receive a grant, we will be required to submit a 6 month and year-end report. I also understand that, should the project change from the narrative submitted in this application, I am required to report this immediately to St. Germaine Children’s Charity.

Executive Director’s Signature

Print Name

Date: _____



PROJECT NARRATIVE GUIDELINES

Narrative may not exceed 4 pages in 12 pt. type.

- 1. Organization Information:** Please give a brief summary of your organizational history and how you address and prevent child abuse in San Diego. Please include your mission statement.

- 2. Program/Project:** A. Please state in approximately 60 words the specific use of the requested funds. Describe the activities for the proposed program/project and how funding will make a meaningful difference to your organization and the youth you serve. B. Is this a one-time or on-going project? C. What makes your program unique?

- 3. Impact:** Describe who will be served by this program/project. Provide the approximate number of children, families, and/or care providers served as well as the geographic area in San Diego County.

- 4. Collaboration:** Describe other charitable organizations you partner with to address the needs of the community and how the proposed program/project is different than existing programs.

- 5. Evaluation:** Please describe how you evaluate the outcome of this program. Specify the program/project goals and how you measure a successful impact.

- 6. Staff qualifications:** Please outline key staff and volunteers' qualifications that are critical to the proposed program/project. Do you anticipate any staff changes in the next year?

7. Other funding: Please identify key funding sources including pledges for this program/project.

8. Sustainability: Describe how you intend to continue this program/project beyond the grant period. What circumstances would cause this program to be delayed or discontinued?

Please send one electronic copy by **Wednesday, February 7, 2024** with required attachments to the Vice President of Philanthropy **and** the Co-Chairs of the Grant Committee:

Andrea Anderson: evanandquinnsmom@gmail.com

VP Philanthropy

Cathy Boychuk: cathyb@san.rr.com

Co-Chair Grant Committee 2024

Katie Oliver: katieannechristensen@gmail.com

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