

# **Catholic School Grants**

## Grant Application

This Grant Application Form is to be used for Catholic School Mission & Catholic identity, program improvements, instructional resources, and technology needs. For school building repair requests please use the Love One Another Grant Application. Questions can be sent to <u>loveoneanothermke-grants@archmil.org</u> or contact Samantha Wright at (414) 769-3327.

### School Contact Information

School Name Contact Person	Title	
Address		
City	State	Zip code
Contact Phone Number Contact email		

Title of this Grant Request:

Please state, in one sentence, how you propose to use the grant money you are requesting:

Amount Requested \$	Total Project Cost \$

Grant awards may range between \$5,000 and \$25,000, based on the school's application and trustee evaluation.

Please check the specific category best describes the grant: Mission & Catholic Identity (I.E. Faith Formation Programs, Enrollment Initiatives, etc.)

Instructional Resources/Program Improvements

Technology Needs



#### Grant Proposal Information

Please describe the purpose for which you are requesting funding, and clearly explain how it will support the purpose of the Love One Another Trust by strengthening your Catholic school. Please explain who would benefit from this grant both directly and indirectly.

How would the impact of this grant contribute to the growth and strengthening of Catholic education at your school? What is the anticipated scope of its impact?

How will the impact of this grant be documented and evaluated?

What is the projected level of support for this grant from your school / parish leadership and community?

How will you sustain the program or purpose or initiative which would be funded by this grant in the future after all of the grant money has been spent?



Has the school received any prior grants from the Love One Another Trust? If yes, please list dates and the amount of the grant awards.

Are there other important considerations regarding this grant request which will inform the Trustees in their consideration of this grant application?

#### Grant Package - Application Checklist:

Completed Love One Another Catholic School Grant Application
Budget for the proposed project, including Revenues and Expenses
Organization's income and expenses statement for the current year
Organization's income and expenses statement for the prior year
List of Leaders (For a parish, members of the Pastoral Council. For a school, members of the School Board. For others, members of Board of Directors.)

Please mail all required documents to P.O. Box 070912, Milwaukee, WI 53207-0912, or email to loveoneanothermke-grants@archmil.org

I certify that the above facts are true to the best of my knowledge and belief and I understand that I subject myself to disciplinary action in the event that the above facts are found to be falsified.

I, the undersigned, agree to the terms above.

Preparer Signature

I certify that the above facts are true to the best of my knowledge and belief and I understand that I subject myself to disciplinary action in the event that the above facts are found to be falsified.

I, the undersigned, agree to the terms above.

Authorized Signature

Authorized Signature (The Authorized Signature is: the School President or Principal)