Outreach Funding Application

St. Elizabeth Ann Seton Parish 12700 W. Howard Avenue New Berlin, WI 53151 262-782-6760

Date			

Harrie or organization						
Address						
Application Contact			Title			
Phone	Fax	E-Mail				
Head of Organization _			Title			
Fax	Phone	E-Mail _				
Tax ID Number	Does your	Does your organization possess a 501(c)3 approved status? Yes No				
a financial stateme	nt for the specif	fic program being	he requesting organization along with solicited for funding.			
Total Proposed Project	or Program Budg	get				
Amount Requested		Anticipated Source	es for Balance			
	\	When are Funds Ne	eded			
What is the project or	program and how	v does it relate to yo	our organizations mission?			
 Describe the characteristi 	• •	serve (size, geograp	hic, demographic and socio-economic			

• How will you involve the population you serve

Name of Organization

- Describe your plan and how you will execute and accomplish it
- Specifically, how will our funding be utilized

What is the expected outcome and the evaluation process?

- What is the timetable, duration of the project or program (initiation through conclusion)
- What are the indicators of a successful outcome
- When and how will the results be communicated to us

How is your organization qualified to carry out the project or program?

- Do you have a policy which states that your organization does not discriminate as to age, race, religion, gender or national origin
 Yes
 No
- Who will be responsible for successful accomplishment of project or program and what is their past experience in this area
- Document your past accomplishments and success stories, especially relating to this project and/or population
- What is your contingency plan, what will you do if this project is under or over funded