

Mary’s Pence Grants

Checklist for Completion

*Please be sure to include the following:*

☐ Part I: Organization Information and Eligibility

☐ Part II: Project Information

☐ Part III: Budget

☐ Organizational budget

☐ Project budget (if different than organizational budget)

☐ Part IV: Reference

**2017-2018 MARY’S PENCE GRANT APPLICATION**

Please type or print.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **PART I: Organization Information** | | | | | | Date | |
| Organization to be Funded | | | | | | Age of Organization  ☐ Startup  ☐ 1-3 years  ☐ More than 3 years | |
| Name of Project or Ministry | | | | | | | |
| City, State/Department and Country Where Project Takes Place | | | | | | |
| Name and Title of Contact Person | | | | | | |
| Address | | City | | Postal Code | | |
| State/Department | | Country | | |
| Preferred Phone | | | Email Address | | | |
| Alternative Phone | | | Web Page URL (if applicable) | | | |
| Do you have 501c3 tax status in U.S.? No ☐ Yes ☐ If yes, provide your #EIN: | | | | | | |
| Organizational Budget $  (Maximum $200,000) | Project Budget $ | | | | Amount Requested $  (Maximum $4,000) | | |
| Has the organization received a grant from Mary’s Pence in the past? Yes ☐ No ☐  If yes, indicate each year funded and amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| Provide one reference. This person should have practical, current knowledge of the project under consideration. Provide name, address, phone, and email. No letter is required. | | | | | | | |
| If you are a new applicant, how did you learn of Mary’s Pence Grants? | | | | | | | |
| If Mary’s Pence funds this project, would your organization be interested in applying for future grants (up to three total)? Yes ☐ No ☐ | | | | | | | |
| If your funding is approved, to whom should the check be written and where should it be sent? | | | | | | | |
| Please list any local press in your organization’s area. Mary’s Pence will contact the media if your funding is approved. | | | | | | | |

**PART II: Project Information**

Answer the following in two single-spaced pages or less.

1. Describe your organization, including its mission, history, size, board, community partners and support, and the population it serves.
2. Please describe the project:

* What is the need?
* What do you want to accomplish, and how will you know you are successful?
* How did this project get initiated?
* What are the key steps to accomplishing this project?

1. How does your project fit the values and guidelines outlined for Mary’s Pence Grants?

* In what ways is your project women-centered?
* How is your project community-centered?
* How will your project contribute to social justice values? You can address one or more of the following, including: human dignity, the common good, the right to economic security and dignified work, care for the earth, participation, subsidiarity (decisions are made at the most local level possible and involve those most impacted) and nonviolence.
* How will your project work to create sustainable change in your community?

**Part III: Budget**

1. Attach a one page itemized ***budget summary for the project/ministry***, including income and expenses. Indicate how a Mary’s Pence Grant would be applied. The budget should explain the whole amount needed, the amount contributed by the organization itself, and the amount and sources of additional funding.
2. Attach a one page copy of your ***organization operating budget***. Indicate how many employees are covered in the salary line, how many are women, and what positions they hold.

**APPLICATION INFORMATION**

PLEASE SEND YOUR APPLICATION BY EMAIL, FAX, OR HARD COPY TO:

Mary’s Pence, 275 East 4th Street #510, St. Paul, MN 55101

Fax: 651-222-9232 or E-mail: [inbox@maryspence.org](mailto:inbox@maryspence.org)

Grant applications are accepted at any time. Copies of this application are available in Spanish. Grant applications are accepted in English or Spanish.

If you have question please call Katherine Wojtan at 651-788-9869