

TALBOT HALL FUND GRANT APPLICATION

Date Submitted: _____

PARISH/ORGANIZATION:

CONTACT PERSON:

ADDRESS:

TELEPHONE NUMBER:

E-MAIL ADDRESS:

PROGRAM FOR WHICH FUNDS ARE SOUGHT:

A. AMOUNT REQUESTED _____

B. BRIEF DESCRIPTION OF PROGRAM

C. PROGRAM DATA:

	THIS YEAR	NEXT YEAR
NUMBER OF CHILDREN TO BE SERVED	_____	_____
PROGRAM COSTS:	_____	_____
COST PER CHILD:	_____	_____
OTHER FUNDING:	_____	_____

(Indicate whether guaranteed (G)
or anticipated (A))

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In addition to the information on this grant application, please provide the following (numbering all pages):

A. Evidence of need for this program

1. Goals and objectives
2. Describe your budget for the year, showing revenue and expenses for the particular program for which funds are being requested.
3. List program personnel by position, title, and compensation
4. Describe the use of volunteers in the program.
5. If applicable, provide evidence of community support
6. List Pennsylvania counties served by the program

B. Background information on applying parish/diocesan organization

1. Accreditation/Certification/Licensure
2. If applicable, proof of Tax-Exempt status
3. Financial Statement of parish/diocesan organization showing revenues, expenses, assets, liabilities, and final balance for previous fiscal year