

2018 RICE BOWL GRANT APPLICATION



Before filling in the application below, please read the Criteria and Guidelines

DATE: ____/____/2018 AMOUNT OF GRANT REQUEST: \$ _____

NAME OF PARISH OR ORGANIZATION: _____

ADDRESS: _____ CITY: _____ ZIP: _____

CONTACT PERSON: _____ POSITION/TITLE: _____

DAYTIME PHONE: _____ EMAIL: _____

WEBSITE ADDRESS (if one exists for your organization/project): _____

Name of program/project (if applicable): _____

Address (if different from above): _____ CITY: _____ ZIP: _____

List two persons or organizations, independent of your program, project, organization, who could give information regarding your efforts.

1. Name: _____ 2. Name: _____

Daytime phone: _____ Daytime phone: _____

E-Mail Address: _____ E-Mail Address: _____

ONLY Catholic parishes need to complete this highlighted section.

For applications made by a parish, the appropriate parish staff person's signature is required indicating his/her knowledge and approval of the grant application.

Signature: _____ Date: ____/____/2018

Name (please print): _____ Title: _____

NAME OF ORGANIZATION OR PARISH: _____

PROGRAM DESCRIPTION: Please tell us (1) your present services;
(2) number of volunteers and/or paid staff;
(3) approximately how many people you serve

Please feel free to attach additional information.

What was your total program income last year? \$ _____ How much of this was for food? \$ _____

What is your present source(s) of funding for FOOD ONLY? (government, private donations, etc.)

How does this fit in with existing food programs in your service area?

How will CRS Rice Bowl and/or Catholic Charities Solidarity Team be acknowledged, should you receive a grant? Is it possible for you to continue a CRS Rice Bowl campaign in your institution?

Describe how RICE BOWL funds would be used.

SEND APPLICATION BEFORE AUGUST. 31, 2018 TO EITHER:

Regular mail: **CRS Rice Bowl Grants, Throop Avenue Center, 56 Throop Ave., New Brunswick, NJ 08901** or

EMAIL: **Deacon Michael Martini**, CCST Rice Bowl Grant officer, mmartini@ccsolidarity.org

If your application is approved, the process for receiving the award check will be done in the following manner:

Parishes: The check will be made payable to your parish, designated for the program, and mailed to the parish office. ***A copy of the disbursement letter will be sent to the contact person.***

ALL OTHER ORGANIZATIONS: The check will be made payable to and mailed to the organization or its fiscal agent. Checks cannot be made payable to an individual.