


Catholic Foundation
 DIOCESE OF ST. AUGUSTINE 
 Catholic Foundation Grant Application
 Fiscal Year 2024-2025

Who can apply:

Only organizations, and associated ministries affiliated with those organizations listed in the Official Catholic Directory for the Diocese of St. Augustine, or projects and programs operated under the auspices of the Diocese of St. Augustine may apply.

Completed grant applications and attachments must be received by **December 15, 2024**. **Late applications will not be considered.** Applicants will be advised of grant award decisions in March 2025.

We are here to help, please call the Catholic Foundation office at 904-208-6927 with questions.

Please submit a separate application for each grant request.

Applicant Information:

Organization name: _____

Mailing address: _____

Contact name: _____

Phone: _____ Email: _____

Role/Position: _____

Project/Program Information:

Grant amount requested: _____

Project/program name: _____

Start date of program: _____ End date of program: _____

The Catholic Foundation will consider requests that reflect the mission and values of our Catholic faith in three areas of focus; evangelization, community outreach, or

parish life. Organizations and their proposals must be engaged in addressing one or more of these specific areas. Funding is given greater consideration when the application demonstrates the intersection of four areas: need, opportunity, potential impact, and collaboration.

Please check the box that **best** describes the project/program. See the grant application instructions for additional descriptions of funding areas.

- Evangelization
- Community outreach
- Parish life

Please explain why your project/program fits this priority:

For those who have selected **Evangelization**, please answer the following three questions before proceeding:

- a. Is this effort focused on individuals or groups?

- b. Why are you choosing to do this project/program instead of something else?

- c. Who will be invited to participate in this project/program?

Project/Program Description Narrative: *Please use only the space provided.*

d. Project/program summary:

e. Specific need that the project/program will address:

f. Desired outcomes of the project/program:

g. Population served by the project/program:

h. Methods that will be used to achieve the objectives of the project/program:

i. Is project/program ready to be implemented and leadership in place?

Yes No If no, when will it be ready? _____

Project/Program Outcome Evaluation:

How will you determine (or evaluate) the success of this project/program? What results do you expect from each output or activity?

- a. How will the success of the project/program be defined?

- b. What benchmark(s) will be used to evaluate the success of the project/program?

- c. Who will gather the data to evaluate the success of the project/program and what method will be used?

Financial Summary:

- a. Please attach a complete budget of the project/program to this application. Please provide details which explain and support the exact amount requested. If the project/program includes construction or purchase of significant materials, please refer to the diocesan policy for obtaining quotes.

- b. What percentage of the total project/program budget is being requested from the Catholic Foundation? What is the source of the balance of the funds?

- c. If this grant application is approved and funded, what is the approximate time frame for spending the funds?

- d. Is this an ongoing project/program? **Yes** **No**

- e. Has your organization applied for grants for this program/project from the Foundation in the past five years? **Yes** **No**

- f. Has your organization received grants for this program/project from the Catholic Foundation in the past five years? **Yes** **No**
If yes, how many times? _____
- g. Describe your sustainability plan. How will you continue to maintain the project/program in future years?

Attachments Required:

1. Letter of support from pastor/diocesan director/principal
 2. The program/project budget (use form included)
 3. Quote or proposals of any planned costs (if applicable)
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If this grant application is approved and funds awarded, you agree to:

1. Submit a letter of acknowledgment to the Catholic Foundation upon receiving funds.
2. Submit an interim progress report, including details of expenditures and digital photos, by October 31, 2025.
3. Submit a final report, including details of expenditures and digital photos, by April 30, 2026.

I/we have read and understand the Catholic Foundation Grant Application Instructions and understand that if grant requirements are not met, our organization may be required to return the funds and/or be deemed ineligible for future grants.

I/we agree to the conditions of grant acceptance as outlined in the Catholic Foundation Grant Application Instructions.

Signed application and budget forms can be e-mailed to cfgrants@dosaf.com or mailed to Catholic Foundation, 11625 Old St. Augustine Road, Jacksonville, FL 32258.

Names/Signatures Required:

Print Name of Contact

Print Name of Pastor/Diocesan Director/Principal

Signature of Contact

Signature of Pastor/Diocesan Director/Principal

Email

Email

Date

Date

