



# Presbyterian Hunger Program U.S. Based Projects Grant Application Form

Reference Number  
Do not write in box

- Important:**
1. Follow the separate instructions, **especially** the budget sheet instructions found at [www.pcusa.org/hunger/grants](http://www.pcusa.org/hunger/grants).
  2. Deadlines for submission and guidelines for applying can be found at the above website.
  3. Submit this application by email to [Andrew.KangBartlett@pcusa.org](mailto:Andrew.KangBartlett@pcusa.org). Non-electronic attachments should be mailed to the address below.
  4. This cover sheet must be emailed with an electronic signature or faxed to (502) 569-8963.
  5. This application is for U.S.-based organizations only; see [www.pcusa.org/hunger/grants](http://www.pcusa.org/hunger/grants) for international forms.

## I. General Data

1. Name of Applying Organization:

Check (or copy and paste this:) if you have 501(c)(3) Status

2. Project Title (or "General Support"):

3. Mailing Address:

4. Contact Person:

5. Job Title:

6. Phone:

7. Email:

8. Webpage:

9. Applying Organization's Total Annual Budget: \$

10. Budget Year:

11. If not requesting "General Support", give the Project's Total Budget (12 months): \$

12. Amount requested from PHP: \$

13. Timeframe for use of funds: through:

14. Previous Funding Received from PHP (year, amount):

15. Previous Funding Received from other Presbyterian sources (source, year, amount):

16. PHP Program Area addressed by this project (indicate primary focus):

- Direct Food Relief    Hunger-Related Development Assistance    Education about Hunger  
 Influencing Public Policy Related to Hunger    Lifestyle Integrity, including Environmental Justice

17. Geographic Focus:  Local    Statewide    Regional (describe: \_\_\_\_\_)    National

18. Synod:

Presbytery:

Find which synod and presbytery you are located in at [www.pcusa.org/links](http://www.pcusa.org/links)

19. Date submitted:

20. Executive Director (type or print):

Signature: \_\_\_\_\_

PRESBYTERIAN HUNGER PROGRAM • 100 WITHERSPOON STREET • LOUISVILLE, KY 40202-1396  
FAX: 502-569-8963 • [ANDREW.KANGBARTLETT@PCUSA.ORG](mailto:ANDREW.KANGBARTLETT@PCUSA.ORG)

---

**Please read the following before completing Section II:**

This application should propose work in one or more of the following types of activities, which are more thoroughly described in the Presbyterian Hunger Program Operating Guidelines (found at [www.pcusa.org/hunger/grants](http://www.pcusa.org/hunger/grants)):

- Direct food relief to poor persons
- Hunger-related development and empowerment of poor people and communities
- Educating the church community and public about hunger and its underlying causes
- Advocacy for public policy changes in political and economic systems to provide food for poor and hungry persons and/or empower their self-development
- Assisting the church community to move toward responsible personal and corporate lifestyles

In all areas, the Guidelines call for applications to reflect:

- An understanding of the root causes of hunger
- A commitment to upholding the integrity of God's creation
- The empowerment of poor people; especially women, racial/ethnic minorities and disadvantaged groups
- Involvement of beneficiaries in the planning, implementation, management and governance of the project
- Clearly stated objectives, feasible methods, appropriate technologies, a plan for evaluation, competent staff and a clear, adequate budget
- Appropriate relationships with the church, especially the Presbyterian Church (USA) and its ecumenical partners
- Appropriate relationships with other groups carrying out similar programs

**Your funding proposal will be evaluated on the basis of these criteria. The questions in Section II provide an opportunity for you to describe how you meet them.**

Feel free to reformat Section II on your computer, but please be concise.

**\* Maximum of 5 pages for Section II; no less than 11 point font.**

---

## **II. Specific Project Information**

1. In no more than 150 words (10-12 lines), describe what you propose to do.

2. How will the proposed activities change the conditions that cause hunger in the community?

3. Describe the applying organization, including a) information on how and when it was formed, b) how it is related to the community, c) what it has accomplished and d) how it is governed. Indicate if the organization has ever operated under another name.

4. What are your specific, measurable, objectives for the project during the period covered by this application? (For example: (1) Increase the number of lunches served from 150 to 200 per week by October of this year; (2) Increase the number of low-income board members from 1 to 5 by the end of the year.)

5. Describe the specific activities to be carried out in reaching these objectives. If appropriate, include a timeline and a description of how paid and volunteer staff will be used.

6. How (and by whom) will your results and your process be evaluated? Be specific.

7. Describe the people who will benefit from this project and how they will be involved in the planning, implementation, governance and evaluation of the project.

8. Describe any Presbyterian or other church involvement with this project or with the applying organization.

9. Describe the working relationships among the applying organization and other organizations in your area carrying out similar or related efforts.

10. Describe your plans for future financial support for this project (or organization, if general support) assuming PHP funding is received for the time period requested.

### III. Financial Information

Complete the budget information form on the following two pages. If requesting funding for “general support,” use the budget for your entire organization. If requesting funding for a specific project, use the budget only for that project **and** complete the Budget Summary at the end of this section.

PROJECT BUDGET INFORMATION 1. COSTS AND INCOME (please see separate instructions)		Previous Period You must fill in this column unless your organization or project has not existed before.	Grant Request Period Same as “timeframe for use of funds” in Section I
	<b>PERSONNEL COSTS</b>		
1	Salaries (list individuals’ salaries in Section V)		
2	Benefits (list on next page, enter total from line 35 here)		
	Consultant and contract services:		
3	Audit		
4	Legal		
5	Outside training		
6	Other (describe):		
7	<b>Personnel Sub-total</b> (total of lines 1-6)		
	<b>OPERATING COSTS</b>		
8	Rent/Mortgage		
9	Utilities (not including telephone)		
10	Telephone		
11	Office/Computer Equipment		
12	Other Equipment (describe)		
13	Supplies		
	Travel		
14	Local		
15	Out of town		
16	Postage		
17	Insurance		
	Other operating costs:		
18	Describe:		
19	Describe:		
20	<b>Operating Sub-total</b> (total of lines 8-19)		
21	<b>PROGRAM COSTS</b> (if not included above) (List on next page, enter total from line 43 here)		
22	<b>TOTAL EXPENDITURES</b> (total of lines 7, 20, and 21)		
	<b>INCOME</b>		
23	Self-generated (membership fees, sales, etc.)		
24	Grants already confirmed (list on next page, enter total from line 51 here)		
25	Value of in-kind contributions that were included in expenses		
26	Interest income		
27	Other income (list on next page, enter total from line 55 here)		
28	<b>Total committed income</b> (total of lines 23-27)		
29	<b>INCOME NEEDED TO BALANCE BUDGET</b> (subtract line 28 from line 22)		
30	<b>AMOUNT REQUESTED FROM PHP</b>		

PROJECT BUDGET INFORMATION 2. ITEMIZATIONS (please see separate instructions)		Previous Period You must fill in this column unless your organization or project has not existed before.	Grant Request Period Same as "timeframe for use of funds" in Section I
<b>BENEFITS</b>			
31	FICA		
32	Medical/Dental		
33	Pension		
34	Other:		
35	<b>Total Benefits</b> (total of 31-34; transfer to line 2)		
<b>PROGRAM COSTS</b>			
36	A.		
37	B.		
38	C.		
39	D.		
40	E.		
41	F.		
42	G.		
43	<b>Total Program Costs</b> (total of 36-42; transfer to line 21)		
<b>GRANTS ALREADY CONFIRMED/RECEIVED</b> (Attach separate listing if needed)			
44	A.		
45	B.		
46	C.		
47	D.		
48	E.		
49	F.		
50	G.		
51	<b>Total Committed Grants</b> (total of 44-50; transfer to line 24)		
<b>OTHER INCOME</b> (ex: donations, sales, payment for services, etc.)			
52	A.		
53	B.		
54	C.		
55	<b>Total Other Income</b> (total of 52-54; transfers to line 27)		
<b>POTENTIAL GRANTS:</b> Requested but not yet confirmed. List grant-maker and include the date you expect to hear the decision.			<b>Amount Requested</b>
56	A.		
57	B.		
58	C.		
59	D.		
60	E.		
61	F.		
62	G.		

APPLICANT ORGANIZATION BUDGET SUMMARY Based on the entire organization's budget. Must complete if the above budget was for a project that is only <i>part</i> of your organizations' work. If requesting "general support," do not use.		Grant Request Period
63	Personnel Expenses	
64	Operating Expenses	
65	Program Expenses	
66	Other Expenses	
67	<b>Total Expenses</b>	
68	Self-generated Income	
69	Interest Income	
70	Grant Income	
71	Other Income	
72	<b>Total Income</b>	

#### IV. Representation

1. Please complete the following chart, providing a description of the policy-makers, staff, and persons benefiting from the proposed project.

REPRESENTATION		Total Number	Women	Asian/ Pacific Island American	African American	European American (white, non- Hispanic)	Hispanic American	Native American	Other (please specify)	INCOME LEVEL		
										Above 125% of Poverty Level	100% - 125% of Poverty Level	Below Poverty Level
Board of Directors for the <b>Applying Organization</b>												
Policy-making Board/ Committee for the <b>proposed project</b> (if different from above)												
S T A F F	Exempt (salary)											
	Non-exempt (hourly)											
	Volunteers											
Persons benefiting directly from this project												

2. Describe how, and by whom, members of the Board of Directors are chosen.

3. Attach a listing of the Board of Directors showing appropriate affiliations/occupations. Note if they are current or former project beneficiaries.

## V. Staff Listing

1. Please provide the following information for all staff working with the proposed project.

Position	Total hours <i>per week</i> worked for the organization	Salary	Percentage of time worked on this project	Salary for this project
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
	hrs	\$	%	\$
<b>Total Project Salaries</b> (must equal line 1 on budget form)				\$

### Salary Range

2. Please provide the following information, based on the **full** staff of the **applying organization**.

	Position	Hours per week	Salary	Earnings per hour
Highest salary paid by the organization		hrs	\$	\$
Lowest salary paid by the organization		hrs	\$	\$

Please complete this checklist () before submitting your application.

- The application is signed by the Executive Director (fax the first page if necessary).
- A listing of the Board of Directors is attached.
- The budget form balances, and the appropriate correlations have been made between budget figures and the entries in Section I (on the first page).
- The Representation Chart has been completed.
- Email** the application, board list and other attachments. If unable to email, please mail only 1 copy.

Some of the following items may be difficult to email in electronic format. If so, please mail.

- A letter (or letters) of support/endorsement from independent groups or individuals is attached.
- A copy of the cover letter from your latest audit.
- A copy of your current W-9 form (download at [www.irs.gov/pub/irs-pdf/fw9.pdf](http://www.irs.gov/pub/irs-pdf/fw9.pdf)).
- Have you submitted a Progress Report for your last PHP grant **if** you have previously received a grant from PHP? If not yet submitted, you plan to submit it by \_\_\_\_\_ (date).

PRESBYTERIAN HUNGER PROGRAM • 100 WITHERSPOON STREET • LOUISVILLE, KY 40202-1396  
 FAX: 502-569-8963 • [ANDREW.KANGBARTLETT@PCUSA.ORG](mailto:ANDREW.KANGBARTLETT@PCUSA.ORG)