



Presbyterian Hunger Program Congregational Hunger Ministry Grant Application

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.
 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. 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 Presbyterian Congregations only; see www.pcusa.org/hunger/grants for other forms.

I. General Data

1. Name of Applying Congregation:
2. Project Title:
3. Mailing Address:
4. Contact Person:
5. Job Title:
6. Phone:
7. Email:
8. Webpage:
9. Applying Congregation's Total Annual Budget: \$
10. Budget Year:
11. Project's Total Annual Budget (12 months): \$
12. Amount requested from PHP: \$
13. Timeframe for use of funds: through:
14. Previous Funding Received from PHP (year, amount):
15. Synod: Presbytery:
16. Congregation PIN:
17. Date submitted:

Approved by Session

Clerk Name:

Signature: _____

Date:

Approved by Presbytery

Person:

Title:

Signature: _____

Date:

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 FAX: 502-569-8963 • ANDREW.KANGBARTLETT@PCUSA.ORG

Please read the following before completing Section II:

The Operating Guidelines of the Presbyterian Hunger Program provide for grants to direct food relief projects that demonstrate an understanding of the root causes of hunger, have “an eye toward long term solutions,” and involve the beneficiaries in planning and implementation. Sessions of congregations may use this form to apply for either 1) start up funding for an organization or project addressing the hunger-related needs of their communities, or 2) an existing organization’s new project which addresses long term solutions to hunger-related problems. It is expected that a grant from the Presbyterian Hunger Program would match a similar commitment from the congregation, in terms of financial or volunteer support. If these criteria are met and finances permit, matching grants of up to \$5,000 for start-up seed funds or \$1,000 for ongoing programs will be considered by the Presbyterian Hunger Program Advisory Committee at their annual meeting in October.

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

*** Maximum of 3 pages for Section II; no less than 11 point font.**

II. Specific Project Information

1. In no more than 150 words, describe the project or organization for which this grant is requested, including who will benefit and why this project or organization is needed in your community.

2. Provide a brief history of the project (or if new, what led up to it). How and when was it formed, how is it related to the community and what has it accomplished? Does it have its own board? If so, how are board members elected?

3. Describe the people who will benefit from this grant. What provision is made for their involvement in decision-making, implementation and evaluation of the activities to be supported by this grant?

4. Describe the support that your congregation provides for this project. Include financial support, contributions of food, equipment or space and volunteer or staff involvement.

5. List other sources of support for the project.

III. Financial Information

Complete the budget information form on the following page. If requesting funding for a specific project, use the budget only for that project.

CONGREGATIONAL HUNGER MINISTRY BUDGET INFORMATION (please see separate instructions)		Previous Period You must fill in this column unless the project has not existed before.	Grant Request Period Same as "timeframe for use of funds" in Section I
	PERSONNEL COSTS		
1	Salaries		
2	Benefits		
	Consultant and contract services:		
3	Audit		
4	Legal		
5	Outside training		
6	Other (describe):		
7	Personnel Sub-total (total of lines 1-6)		
	OPERATING COSTS		
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	Operating Sub-total (total of lines 8-19)		
21	PROGRAM COSTS (if not included above) Describe:		
22	TOTAL EXPENDITURES (total of lines 7, 20, and 21)		
	INCOME		
23	Self-generated (membership fees, sales, etc.)		
24	Grants already confirmed		
25	Value of in-kind contributions that were included in expenses		
26	Contributions from congregations		
27	Other income		
28	Total committed income (total of lines 23-27)		
29	INCOME NEEDED TO BALANCE BUDGET (subtract line 28 from line 22)		
30	AMOUNT REQUESTED FROM PHP		

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
Session of <i>applying congregation</i>												
Policy-making Board/ Committee for the <i>proposed project</i> (if different from above)												
S T A F F	Exempt (salary)											
	Non-exempt (hourly)											
	Volunteers											
Persons benefiting directly from this project												