

<h2 style="margin: 0;">First Parish Church Duxbury</h2> <h3 style="margin: 0;">Program Cell Fund Grant Proposal — Application & Tracking Form for Funding</h3>
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Instructions: All applicants should answer Question 8 on the next page and, if applicable, Question 9. Please read and acknowledge the statement at the bottom of the form.

If Project funding will be on-going (*i.e.*, spent over time), please refer to the attached Policy and Procedure statement. Attach additional pages as needed.

Applications should be delivered to First Parish Church via email at admin@uudux.org or mailed to FPC, Attn: Lenore, 842 Tremont Street, P.O. Box 1764, Duxbury, MA 02331, or brought to the church office.

Date of Application:

1. Applicant's name:	Phone number:
Email:	FPC Member? <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Please indicate which category you are applying for:

Social Justice :	<input type="checkbox"/> External Organization Award	OR	<input type="checkbox"/> Internal Program Funding
OR			
One or more of the following:	<input type="checkbox"/> Communications	<input type="checkbox"/> Information Technology	
	<input type="checkbox"/> Leadership Development	<input type="checkbox"/> Enrichment	

3. Project name:

Start Date of Activity:	End Date:
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4. Amount Requested:	Amount Approved:
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5. Sponsoring Committee (if applicable):

6. Grantee Recipient:	Email:
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Address:

7. List any other sources of funds and amounts:

I have read all **applicable** requirements for submitting expenses. I understand that members of the Cell Program Grant Committee will assist me with any questions which I may have regarding submitting my expenses for reimbursement.

Approval Date:	Grant Number:
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If Project funding will be on-going, please answer the following questions here or on another page and include them with your application:

8. What do you want to do? *Describe your program/project in general terms and how it meets the Funding Guidelines criteria. What goals do you want to achieve?*

For non-Social Justice Grants

9. How do you plan to do it? *How will you accomplish your task? Who will be involved? What objectives do you expect complete? How will you evaluate and measure success?*

For Program Cell Committee Use Only

Responsible Committee Member:			
Report Reminder Sent?	<input type="checkbox"/> Yes <input type="checkbox"/> No	End of Grant Report Received?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Funds Remaining?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Remaining Amount:	

Approval Date:	Grant Number:
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