

First Parish Church Duxbury Program Cell Fund Grant Proposal — Application & Tracking Form for Funding

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 can be delivered to First Parish Church via email to admin@uudux.org by clicking on the Submit button to the right; 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? ☐ Yes ☐ No

2. Please indicate which category you are applying for:

Social Justice:

☐ External Organization Award

OR

☐ Internal Program Funding

OR

One or more of the following:

☐ Communications

☐ Information Technology

☐ Leadership Development

☐ Enrichment

3. Project name:

Start Date of Activity:

End Date:

4. Amount Requested:

Amount Approved:

5. Sponsoring Committee (if applicable):

6. Grantee Recipient:

Email:

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? ☐ Yes ☐ No	End of Grant Report Received? ☐ Yes ☐ No
Funds Remaining? ☐ Yes ☐ No	Remaining Amount:

Approval Date:	Grant Number:
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