



UNITARIAN UNIVERSALIST FUNDING PROGRAM
P.O. BOX 301149, Jamaica Plain, MA 02130

Grant Application Cover Sheet
(See Website for CBCO, GOTV and SSL applications)

Date: _____ Grant Cycle Spring _____ / Fall 20 _____

Organization Submitting Proposal: _____

Address: _____

City, State/Province, Zip/Postal Code: _____

Contact Person: (Ms./Mr./Rev./Dr.) _____

(Please note that we may call the contact person to discuss the proposal.)

Day Phone: _____ Evening Phone: _____

Email address (required): _____ Website _____

Fiscal agent (must be a 501(c)3 or a UU organization): _____

- Grant requested from :
- _____ The Fund for a Just Society
 - _____ The Fund for UU Social Responsibility
 - _____ The Fund for Unitarian Universalism
 - _____ The Fund for International Unitarian Universalism

Project Title: _____

Project Start Date: _____ Expected Completion Date: _____

UU Grant Requested: \$ _____ UU Challenge Grant Requested: \$ _____

Projected Income from Other Sources: \$ _____ Total Project Budget: \$ _____

Total Organizational, Church or Sponsoring Organization Budget: \$ _____

For UU Congregations: What is Number of Certified Members: _____

How did you hear about the UU Funding Program? _____

Previous Funding Information

If this organization/project has been previously funded by a UU Funding Program grant, please include a copy of the most recent Final (Interim) Report (Even if you sent it earlier).

Proposal Checklist (Corresponds to "Materials to Be Included" in the Application Guidelines. Please refer to the website or to the brochure for detailed information.)

The following materials must be enclosed:

- _____ A. Application Cover Sheet (this page)
- _____ B. Final or Interim Report(s) if previous grantee
- _____ C. Narrative Description (8 pages maximum --number, write out, and answer all questions.)
- _____ D. Project Budget (using our form)
- _____ E. Annual Organization Budget (one page preferred)
- _____ F. Decision-Making Group: list of names and affiliations
- _____ G. For non-UU organizations: one copy of your or your fiscal sponsor's 501(c)3 letter
- _____ H. For UU organizations: a letter from your board supporting the proposal

Please mail 2 copies, collated of all materials. Do not staple or enclose in presentation folders (clips okay).

FOR OFFICE USE ONLY

_____ *APPLICATION COMPLETE*

ANNUAL PROJECT BUDGET Project Budget Dates: From/To _____

Organization: _____ Application Date _____

A. Cash Expenses:

Expense Items (e.g. Salaries, Copying, Postage, etc.)	Project Budget Line Item Total \$	\$ Requested from UU Funding
Totals	\$	\$

B. Cash Income

Income Source (e.g. Individual Donors, Events, etc.)	Source Total \$	\$ Raised to Date
Requested From UU Funding Program:	\$	-----
Totals:	\$	\$

For All Applicants: Use this format for your Project Budget. You may create it in your own word processing program and add additional lines, if necessary. Please attach a *separate* page for "in kind" (non-cash) expenses and income, if applicable.