

**NORTH DAKOTA EPISCOPAL FOUNDATION
2025 GRANT APPLICATION**

Please be sure your application addresses the grant guidelines found at www.ndepiscopal.org\ndef

Name of Program _____

Implementing Parish/Organization _____

Contact Person (Name and Title) _____

Address _____

Phone Number _____

E-mail Address _____

1. Amount Requested: \$ _____
2. Description of the proposed program including the following:
 - Goals and specific objectives of the program.
 - Program relationship to diocesan, congregational or organizational mission strategies
 - Target population and city/area to be served.
 - Program budget (list incomes and expenses by item and amount).
 - Any other funding sources: amounts received or requests for other funding.
 - Description of how the program will be evaluated with a detailed accounting for all grant funds.
 - Support for the program, if any, after the grant expires.
 - Information for issuing a check if grant is approved: Name and address

Signature of Contact Person

Date

Directions: Send copy of completed grant application (including answers to all points of question 2 - Description of Program), letter of support from your vestry along with any additional supporting documentation by e-mail to jbaird01@gmail.com or by mail to:

Dr John Baird
North Dakota Episcopal Foundation
3414 Rivershore Drive
Moorhead, MN 56560

Deadline for the first 2025 cycle: March 24, 2025

Deadline for second 2025 cycle: November 1, 2025

Revised April 2025