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**5-C Grant Application**

**Purpose:**

This grant provides funding to help leaders strengthen their program in one or more of Urban Alliance’s 5-C areas: Christian Witness, Program Culture, Core Services, Connection or Program Capacity.

**Funding Criteria:**

* Your program must be operated by a church or organization in the Urban Alliance network, have completed a Program Commitment Form and be in good standing (i.e. participate in learning communities, submit monthly data and follow policies of program development opportunities).
* The program leaders who complete this application must read the Urban Alliance *5-C* booklet corresponding to the areas impacted by the project.
* Grants of up to $500 are available.
* Grants are competitive and awarded on an annual cycle. Efforts that are sustainable after the 1-year grant period will be given priority.

**Grant Questions:**

**Question 1: Community Needs and Program Overview**

1. Provide an overview of your program, how it helps people, and the community needs it addresses.

**Question 2: 5-C Focus Area**

1. Which of Urban Alliance’s 5-C areas will be addressed through this grant project?
2. Which program volunteer(s) and/or staff member(s) read the Urban Alliance *5-C Framework* booklets related to the areas noted above?

**Question 3: Project Summary**

1. What will you do to strengthen the 5-C areas noted in questions 2A?
2. What is the timeline of activities that you will complete and who will be responsible for each?

**Question 4: Outcomes**

1. How will you know if your project was a success? How will you know if it had a positive impact?

**Question 5: Budget**

1. What will you purchase with grant funding? Please provide an itemized budget for your requested funding using the table below and narrative describing how you will use each item. Rows may be added as needed.

|  |  |  |
| --- | --- | --- |
| **Item (Quantity)** | **Expenses** | **Grant Request** |
| 1. *Example: table and chairs*
 | *$ 750.00* | *$ 500.00* |
| 2. | $ | $ |
| 3. | $ | $ |
| TOTAL | $ | $ |

**Contact Information:**

Church/Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Title of Senior Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Contact Information for Person Completing This Application:**

Name: Mr./Mrs./Ms./Dr./Rev.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information for Additional Person Completing This Application (if applicable):**

Name: Mr./Mrs./Ms./Dr./Rev.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Submission: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_

**Application Process:** Please send completed applications to Urban Alliance’s Grant Review Team.

By email: initiatives@urbanalliance.com

By standard mail: Urban Alliance, attn: Grant Review Team, 62 Village Street, East Hartford, CT 06108

**Grant Review Process:** Grant applications are reviewed in the spring and fall of each year.

Grants submitted by **May 1st** will be awarded by June 1st and grants received by **September 1st** will beawarded October 1st. The number of grants awarded is commensurate with Urban Alliance fundraising.

All Urban Alliance grant applications may be accessed online at, urbanalliance.com/grants.