

Objective 1 Grant Application Coversheet
2025 - 2026 Grant Period

Total Objective 1 grant funds available this year: \$50,276.00

Date Submitted (Deadline is October 31st): _____

Parish/School name: _____

Pastor/President name: _____

City: _____ Telephone: _____

E-mail: _____

The following are areas of information needed for the Grant Review Committee to be able to assess your grant application.

BACKGROUND: (Attach a narrative of parish/school demographics. Include # of families, 1st Communions, religious education students, Catholic school students, etc.)

PROPOSED OBJECTIVE AREA OF FUNDING: *** Please note that only one application will be accepted per school system and parish in each objective area. Please prioritize your needs and submit your most critical need.

Total dollar amount requested for this objective: \$_____

Description of your grant request: (Attach a narrative) Please be very specific!
Please see the specific directions that must be followed on the next page.

Other attempts to address this need: (Attach a narrative)

Ramifications of grant not being funded: (Attach a narrative)

Financial status of the parish/school system as of: (date: _____)

* Please do not submit a budget or financial report.

Amount in Expansion Fund: _____ Amount in savings: _____

Amount in other investments: _____ Amount in checking: _____

Amount in General Endowment Funds: _____ Amount of loans: _____

Amount in Dedicated/Restricted Endowment Funds: _____

Pastor/President Signature: _____

Description of Your Grant Request

Please note: Failure to follow these specific directions will result in your application(s) being disqualified. If you have any questions, you are encouraged to visit with Ron Schatz or Bryan Winterberg at the Bismarck Diocese prior to writing and submitting your grant.

If you are applying in objective #1:

To assist schools and parish religious education programs in improving salaries and benefits.

- 1-A.) If you applied for funding in 2024-2025, no repeat funding for the same proposal will be awarded this year. There is only one exception to this policy. Exception: If you applied for and received funding to provide for increase salary(ies) or benefit(s), 50% of 2024-2025's amount received may be applied for this year. Three grant periods are the maximum period allowed for continued funding.
- 1-B.) If you are applying for new funding this year to provide for or increase one or two individual's salaries or benefits, please explain what their current salary/benefits are, what their new salary or benefits would be if you received this grant funding, and how many hours per week are worked by these individuals.
- 1-C.) If you are applying for new funding this year to provide for or increase three or more employee's salaries or benefits, please indicate how many employees will benefit if this grant is funded, and what the low and high range of salaries and benefits currently are. **Funding for any new or improved benefits that have already been implemented for the 2025-2026 school year may be applied for. Please indicate the date this benefit either started or was improved.**
- 1-D.) Please do not describe your parish/Catholic school salaries as "well below average...", instead please include specific \$ amounts for comparisons of local competition.
- 1-E.) Please explain if your parish/Catholic school has recently struggled to hire qualified employees and/or if you have lost quality employees to other local competition's higher salaries.
- 1-F.) Sorry, staff "bonuses" and substitute teacher payments do not qualify for grant funding.
- 1-G.) In all applications, please explain the parish's/school system's long-term plan to maintain the increase. **Failure to explain the long-term plans will result in not receiving any funding.**

► Please complete the following information for your grant application:

Total cost of the item you are applying for: \$ _____
amount to be paid by parish/school: \$ _____
amount to be paid by individual(s): \$ _____
amount requested from this grant: \$ _____

Please submit your grant applications to:

By Mail: **Bismarck Diocese**
Attn: Dee Tracy
PO Box 1137
Bismarck, ND 58502-1137

By e-mail: dtracy@bismarckdiocese.com

On the subject line, please include these words: **2025-2026 Grant Application**

2025-2026 Grant Application Checklist

- ☐ Does this application have its own cover sheet?
- ☐ Is the contact information fully completed?
- ☐ Have you provided quality background information about your parish/school?
- ☐ Have you provided a detailed description of your grant request that follows all of the specific directions on page 2?
- ☐ Have you explained your other attempts to address this need and the ramifications of this grant not being funded?
- ☐ Have you filled in accurate information in the financial status section of the cover sheet?
- ☐ Has the pastor/president reviewed this application and signed it?

Name, daytime telephone number, and e-mail address of the person writing this grant:

Please print or type: _____

