Objective 3 Grant Application Coversheet 2025 - 2026 Grant Period

Total Objective 3 grant funds available this year: \$33,840.00

Date Submitted (Deadline is Oc	tober 31 st):	
Parish/School name:		
Pastor/President name:		
City:	Telephone:	
E-mail:		
The following are areas of infassess your grant application.	ormation needed for the (Grant Review Committee to be able to
BACKGROUND: (Attach a na Communions, religious educations)	•	mographics. Include # of families, 1 st ol students, etc.)
application will be acc		*** Please note that only one nd parish in each objective area. Please ical need.
Total dollar amount requested f	or this objective: \$	
Description of your grant reque Please see the specific d	st: (Attach a narrative) Pleirections that <u>must</u> be follo	
Other attempts to address this n	eed: (Attach a narrative)	
Ramifications of grant not being	g funded: (Attach a narrati	ve)
Amount in Expansion F Amount in other investr Amount in General End	budget or financial reportand:nents:	Amount in savings: Amount in checking: Amount of loans:
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 <u>prior to writing and submitting your grant</u>.

If you are applying in objective #3:

To provide adequate in-service, professional development, religious and other educational opportunities for the teachers in our parish religious education programs and Catholic schools.

- 3-A.) If you applied for funding in 2024-2025, no repeat funding for the same proposal will be awarded this year. There are no exceptions to this policy.
- 3-B.) If you are requesting grant money for a parish mission, please indicate the last time your parish had a parish mission.
- 3-C.) If requesting grant money to attend a workshop or conference, please provide specific information such as:

Registration:	\$
Travel costs:	\$
Hotel costs:	\$ _
Meal costs:	\$ * The diocese will not fund meals
Total cost:	\$

- 3-D.) If requesting grant money to attend a workshop or conference, please specifically identify by name, who will be attending, what the name of the workshop/conference is, where it is located, and the dates.
- 3-E.) If requesting grant money to attend a workshop or conference, please explain if the person/people identified to attend have attended this same workshop or conference in the past. If so, please list the dates they attended.
- 3-F.) If going to a conference/workshop, please explain what your plan is for "sharing" the information learned with others at your parish/school when you return.
- 3-G.) It is recommended that when parishes/Catholic School Systems apply for grant money to fund travel expenses to a workshop or conference, the following criteria are followed. If you received funding last year, please list the name of the workshop or conference, dates, and who attended. Beginning in 2025-2026, the following will apply. Parishes/Catholic School Systems may apply for consecutive years; however individuals may not attend workshops or conferences in back-to-back years.

The diocese will not fund any conference/workshop that was attended prior to 01/15/2026.

Dloose o	If you 1.) To pur apply Please grant f list ite 2.) For tra	complete the following information for your grant application: 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: \$ are applying for the Catechesis of the Good Shepherd program: chase any item(s) needed or for supplies to make the items needed, you can under objective #2 and include a detailed list of the items and their expenses. do NOT submit a long list of items needed because we do not have enough funds to fund every parish and Catholic School's full list. Please prioritize your ms and include a maximum of 15 items. Siming, you can apply under objective #3.		
		grant applications to:		
<u>B</u>	By Mail:	Bismarck Diocese Attn: Dee Tracy		
		PO Box 1137		
		Bismarck, ND 58502-1137		
<u>B</u>	<u>By e-mail</u> :	dtracy@bismarckdiocese.com		
		On the subject line, please include these words: 2025-2026 Grant Application		
		2025-2026 Grant Application Checklist		
	Does t	his application have its own cover sheet?		
	Is the	Is the contact information fully completed?		
	Have :	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 pages 2-3?		
	•	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 th	e 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:		