**Saint Michael and All Angels Foundation of Dallas**

**Grant Guidelines**

**Thank you for applying for a grant from the Saint Michael and All Angels Foundation.**

**Consistent with the Foundation’s mission, *“Seeking and managing funds to enhance the ministries of the church we love,”* we award grants**

* **in support of the mission of Saint Michael and All Angels Episcopal Church of Dallas, and**
* **consistent with the priorities established annually by the rector and the vestry.**

**The Foundation does not fund normal operating expenses (which are dependent upon annual Stewardship), but seeks instead to serve innovative, expansive, and otherwise extraordinary purposes.**

**The Foundation also restricts funding to money currently available for distribution, and makes grants for only one year at a time, with a three-year maximum for any given project or program.**

**In addition to a completed Application Form, please submit the following:**

1. **An organizational structure, including staff members and volunteers**
2. **A comprehensive budget for the proposed program or project, including information, if applicable, about when and how it will become self-sustaining**
3. **Letters of support or other information which should be considered**

**All grant applications must be reviewed and approved by the vestry before being submitted to the Foundation. Applications submitted to the Foundation are reviewed by the Executive Committee which makes a recommendation to the full Board of Trustees of the Foundation at its quarterly meeting. Applicants are notified of the Board’s decision in writing following the meeting.**

**Please submit copies of your completed application to these three individuals:**

***Foundation President (Rowland K. Robinson)***

***Vestry Liaison to the Foundation (Kay Whelan)***

***Vestry Treasurer (Grady Schleier)***

***Saint Michael and All Angels Episcopal Church***

***8011 Douglas Avenue***

***Dallas, Texas 75225***

**Saint Michael and All Angels Foundation of Dallas**

**GRANT APPLICATION**

**Name of Organization or Department making application:**

**Name of Contact person responsible for application:**

**Phone: ( ) \_\_\_ \_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please describe the project or program for which you are requesting funding. Include purpose of the grant, how it will *enhance* the mission of SMAA, who will be served and in what numbers, what level of support you are seeking from the Foundation, and for what time period.**

**Please describe your organization’s or department’s relationship to Saint Michael and All Angels Episcopal Church. (A church department, a separate 501(c)(3), a new organization, etc.) and explain why this project or program is not considered an ordinary operating expense.**

**Has the Foundation previously been asked for funding for this or a similar project?**

***Yes* \_\_\_\_\_\_ (If yes, when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) *No* \_\_\_\_\_\_**

**Within the last three years, has the Foundation funded any other programs or projects in this department of organization? If so, for what projects, when, and in what amounts?**

**How, when, and by whom will the success or effectiveness of this project or program be assessed?**

**Are there any other potential sources of funding for this project/program?**

**If applicable, i.e., if this is not a one-time-only undertaking, please explain how and when the project/program can be expected to be self-sustaining and/or incorporated into the normal operating budget.**