



St. Lawrence District..... Serving 34 UU Congregations
of the Unitarian Universalist Association of Congregations
 695 Elmwood Avenue, Buffalo, New York 14222-1697 -- www.sld.uua.org
 716-882-0430 – smtabone@localnet.com

Chalice Lighters Grant Application for Groups of Congregations

(for clusters or other partnerships) To be submitted to the Growth Committee of the SLD

(Revised: 5/08)

Advice on completing this application: It is anticipated that most applicants will use this as an electronic document and type right into it. Alternatively, you may print it out and both write on it and add pages. Help is available through the District office either in completing this application or creating a five-year plan.

-----COVER SHEET-----

Intent to Apply was submitted on: _____

Application submission date: *(check one)* ___ April 1 or ___ November 1, Year: _____

Congregation and Contact Info

List of Congregations *(use separate page if necessary) Please indicate which congregations pay Full Fair Share Dues to both the UUA and SLD.*

Name:

City:

yes / no contributes full Fair Share to UUA

yes / no contributes full share to SLD

Name:

City:

yes / no contributes full Fair Share to UUA

yes / no contributes full share to SLD

Name:

City:

yes / no contributes full Fair Share to UUA

yes / no contributes full share to SLD

Name:

City:

yes / no contributes full Fair Share to UUA

yes / no contributes full share to SLD

Name:

City:

yes / no contributes full Fair Share to UUA

yes / no contributes full share to SLD

Fiscal Agent: (check will be made out to) Congregation:

Mailing Address:

Project Manager:

Mailing Address:

Phone, day ()

Phone, evening ()

E-mail

Please include a list of project committee members, their congregational affiliations and project responsibilities.

-----**PROJECT IMPACT**-----

1. Describe your Project and how it will promote growth of your congregations.
2. How will you measure the success of your project?
3. Describe how your Project fits with your congregations' mission and vision, and your five-year plans.
4. If you were to receive the Chalice Lighters' grant, what would you say in the appeal letter to describe what you will do with these funds and why the Chalice Lighters should give to you.

-----**PROJECT BUDGET**-----

Provide the budget details for your project including

1. A specific description of how the funds will be used.
2. A specific description of all sources of income for the project (operating budget, fundraising, grants, etc.)
3. It is expected that participating congregations will contribute to the project both dollars and in-kind services. Describe how much each congregation will contribute.
4. If this is an ongoing project, please describe future sources of support.

-----**ATTACHMENTS**-----

Your complete grant application will include:

- Cover Sheet**
- Project Impact**
- Project Budget**
- Authorization**

-----**AUTHORIZATION**-----

The Board of Trustees (or equivalent) of each congregation has authorized this application to the SLD Growth Committee for Chalice Lighter Funds. The Project Manager agrees to be the primary person responsible for managing grant monies, ensuring thank you notes are written to individual Chalice Lighters, communicating with the District Growth Committee and submitting reports evaluating the grant project as requested.

Board Chair / President
of the congregation taking fiscal responsibility

Project Manager

Date: _____

Date: _____

Deadlines for Applications: Application must be received by April 1 for April decision or by November 1 for November decision.

Send the completed application and pertinent attachments prior to the appropriate deadline to:

<p>Growth Committee St. Lawrence District Office 695 Elmwood Avenue Buffalo, New York 14222-1697</p>
