

Holston Foundation Grant Application

Let's Get to Know You!

First Name:	LeRae
Last Name:	Collins
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Contact Information

Project Title:	Grant Sample Application
Contact Person/Title:	Sarah Spaulding
Contact Person's Phone:	865-690-8124
Contact Person's Email:	sspaulding@holstonfoundation.org
Church/Organization Name:	Holston Foundation
Pastor or Organization Leader's Name:	Paul Bowman
Average Church Attendance:	N/A
Church/Organization Mailing Address:	PO Box 900
Church/Organization City:	Alcoa
Church/Organization State:	Tennessee
Church/Organization Zip Code:	37701

Project Logistics

Have you had a grant in the last 5 years?	No
Total amount requested:	3,000
Budget for project:	Please attach a budget here.
All sources of funding:	Church and Community Donations
What categories does your project fall under? Check all that apply:	Outreach & Evangelism; Social Justice
Brief summary of project:	The Holston Foundation Grant Application is for United Methodist and historically Methodist churches and organizations to apply for money for community and enrichment projects.
Timeline of the project:	Ongoing
Please describe the timeline of the project:	Applications open on January 3rd and close on March 31st. Applications take 10-30 minutes to complete on the online Kaleidoscope platform.

Project Information

<p>Describe your project or ministry and its goals.</p>	<p>Please use this space to describe your project and what you are hoping to start or accomplish. Give any details you would like to share, but don't feel the need to write too much.</p>
<p>Need: What need(s) does this project address and how does it meet need(s)?</p>	<p>Please refer to the Grant Policy form on our website to look specifically at the definition of each of these grant considerations. For this question, we are asking you to tell us what your project is going to do, who or what it is going to serve, and how it is going to do that.</p>
<p>Sustainability: Will the project be able to sustain itself? Please explain.</p>	<p>This question is asking about the sustainability and longevity of your project. How will it function? How can you use this money to ensure the lifespan of your project/ministry?</p>
<p>Cooperative Support: Who will be involved in this project?</p>	<p>Tell us who will be involved and how you hope to involve people.</p>
<p>Other comments or things you want the committee to know:</p>	<p>Anything we missed that you want to make sure we know? Put it here.</p>

Certification

Not Available	By checking this box, you confirm your understanding of the Foundation's dedication to planting the seeds of generosity, which involves a member of the Holston Foundation contacting your organization about speaking with your church, presenting the award, and/or receiving updates on the project.;By checking this box, you certify that the pastor or senior leader of your church or organization has been made aware of this project.
Organization Name	Holston Foundation
Applicant Signature	