



ADVANCEMENT FOUNDATION
Supporting the Catholic Diocese of Fort Worth



APPLICATION
Parish Operating Grant – Fiscal Year 2019

Parish Name _____ Parish Number _____

City _____

Amount Requested _____

Identify the need for which an **operating grant** is requested. (NOTE: Construction and/or renovation projects will not be funded through an operating grant.)

In order to have an operating grant application considered, the following items must accompany the application form:

1. A few sentences **describing the need** for which the application is being presented.
2. A description and/or outline of **how the parish will fund the balance** of this need if the full amount requested is not granted. Is it an ongoing need or a one-time request?
3. A copy of the **FY 2018 parish budget**. This application must be signed by the Pastor or Parochial Administrator and the chairs of the Pastoral Advisory and Finance Councils. If a grant is awarded, funds will be distributed only for the need described in this application.

Pastor or Parochial Administrator

Date

Pastoral Advisory Council Chair

Finance Council Chair

Please submit this application and all required documentation by **May 1, 2018**, via email, mail or fax:

Advancement Foundation
800 West Loop 820 South
Fort Worth TX 76108-2919

grants@advancementfoundation.org
FAX 817-945-9442



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FY 2019 PARISH OPERATING GRANT APPLICATION NARRATIVE

Please describe why this operating grant is needed by the parish. How will you fund it next year if your grant is not continued next year? Or if this is a one-time-only request, please identify as such.