**Catholic Diocese of Richmond 2025 Grant Application Diocesan Respect for Life Grant**

1. Parish, School or Organization
2. Address
3. Contact Person
4. Phone Number
5. Email

1. Describe the efforts for which you are requesting funds (please see the General Guidelines):

1. Grant Amount Requested: $
2. List the principal cost elements and indicate the projected amount:

1. Total Cost: $
2. How will the proposed project be paid for? (It is expected that the parish or organization will participate in the total cost.)

Sources of Funds:

Parish or Organization $

Respect for Life Grant $

$

$

Total Funds (Must equal total project cost on line 8) $

1. Has the applying entity received Respect for Life funding in the past? Yes No

Please list:

1. Did you announce receipt of the 2025 Diocesan Respect for Life Grant in your local parish bulletin(s) or organizational newsletter(s)?

□ Yes □ No □ Not Applicable

1. Has the parish participated in the Respect for Life Collection in the past?
Yes No
2. Please provide any other information that you believe would be helpful to the

 grant committee in considering your request.

# Application Certification:

*I have read the Grant Application Guidelines and to the best of my knowledge we qualify to apply. The information in this application and all attachments are true and accurate to the best of my knowledge. I understand that eligibility does not guarantee funding.*

# Contact Person:

Name: (*printed*) Title:

Signature: Date:

# Pastor’s or Organization signature:

Name: (*printed*)

Signature: Date:

# Please send the completed application, along with your supporting materials to:

**Diocesan Respect for Life Grant Application
Catholic Diocese of Richmond**

**7800 Carousel Lane**

**Richmond VA 23294-4201 Attn: Deacon Young**

**OR VIA e-mail:** **byoung@richmonddiocese.org**

**Application Deadline**: **November 15, 2024 RECEIVED or E-MAILED**