

**2020 - 2021 MARY’S PENCE GRANT APPLICATION**

Please type or print.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **PART I: Organization Information** | | | | | | Date | |
| Organization to be Funded | | | | | | Age of Organization  ☐ Startup  ☐ 1-3 years  ☐ More than 3 years | |
| Name of Project | | | | | | | |
| City, State/Department and Country Where Project Takes Place | | | | | | |
| Name and Title of Contact Person | | | | | | |
| Address | | City | | Postal Code | | |
| State/Department | | Country | | |
| Preferred Phone | | | Email Address | | | |
| FaceBook page:  Twitter handle: | | | Web Page URL (if applicable) | | | |
| Do you have 501c3 tax status in U.S.? No ☐ Yes ☐ If yes, provide your #EIN: | | | | | | |
| Does your organization have a fiscal sponsor? If yes, please provide the contact information for your fiscal sponsor (name, address, phone, and email). We will ask for a copy of your agreement if you receive a grant. | | | | | | |
| Organizational Budget $  (Maximum $200,000) | Project Budget $ | | | | Amount Requested $  (Maximum $5,000) | | |
| Has the organization received a grant from Mary’s Pence in the past? Yes ☐ No ☐  If yes, indicate each year funded and amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| Provide one reference. This person should have practical, current knowledge of the project under consideration, but not be a staff member. Provide name, address, phone, and email. No letter is required. | | | | | | | |
| If you are a new applicant, how did you learn of Mary’s Pence Grants? | | | | | | | |
| If Mary’s Pence funds this project, would your organization be interested in applying for future grants (up to three total)? Yes ☐ No ☐ | | | | | | | |
| If your funding is approved, to whom should the check be written and where should it be sent? | | | | | | | |
| Please list any local press in your organization’s area. Mary’s Pence will contact the media if your funding is approved. | | | | | | | |

**PART II: Project Information**

Answer the following in two single-spaced pages or less.

1. Describe your organization, including its mission, history, size, board, community partners and support, and the population it serves.
2. Please describe the project:

* What is the need?
* What do you want to accomplish, and how will you know you are successful?
* How did this project get initiated?
* What are the key steps to accomplishing this project?

1. Mary’s Pence views social justice as actions taken to create social change and/or systems change by

* Shifting public opinion about justice issues
* Forming alliances and collaborations across diverse populations
* Creating change in unjust structure or policies, or
* Building capacity by building leadership, organizing, or other social justice skills

Please describe how your project is focused on creating social change and/or systems change.

1. How does your project include and focus on cis women, trans women, and/or non-binary people?
2. How is your project community-centered and community led?

**Part III: Budget**

1. Attach a one page itemized ***budget summary for the project***, including income and expenses. Indicate how a Mary’s Pence Grant would be applied. The budget should explain the whole amount needed, the amount contributed by the organization itself, and the amount and sources of additional funding.
2. Attach a one page copy of your ***organization operating budget***. Indicate how many employees are covered in the salary line, how many are women, and what positions they hold.

**APPLICATION INFORMATION**

PLEASE SEND YOUR APPLICATION BY EMAIL OR HARD COPY TO:

Mary’s Pence, 275 East 4th Street #642, St. Paul, MN 55101

E-mail: [robyn@maryspence.org](mailto:robyn@maryspence.org)

Grant applications are accepted at any time.

If you have question please contact Robyn Browning at robyn@maryspence.org or 651-788-9869.