Application Deadline Date Today's Date:	e: <u>August 21, 2024</u>
Date Received:	

2024 NEW HOPE PRESBYTERY HUNGER GRANT APPLICATION

A. <u>IDENTIFICATION</u>

В.

1.	Name of your agency/project:					
	Physical Address:					
	Checks made payable to:					
	Mailing Address (if different):					
	First time applying? Previously received funds? When?					
	Links (website/Facebook/other):					
2.	Name & title of contact person:					
	Phone Number(s):					
	E-mail:					
3.						
<u>DF</u>	ESCRIPTION					
	1. Which of the following best describes your agency/project?					
	This is an ongoing agency/project, established in					
	We are planning for expansion or have a special situation (Describe briefly)					
	We are in need of emergency assistance (Describe briefly, telling what steps are being taken to avoid a future emergency)					
	We are starting something new (Describe briefly)					
	2. What is your mission?					
	3. What does the project/agency do?					

	5.	5. If your agency is involved in a direct feeding program, how many people per month does it feed? What kinds of food assistance does the program provide? (Meals, grocery vouchers, food boxes, other)	
	6.	If your agency is involved in development assistance for the hungry, how many people per month are helped? What kind of assistance?	
		Approximately, how many of these people get assistance from other sources?	
	7.	What area(s) do you serve?	
	8.	Describe your organization structure. Include staffing (paid and/or volunteer) and who approves your disbursement of funds.	
C.	BUDG		
	1. 2.	Please attach your most recent budget showing anticipated receipts and expenditures. Describe your main sources of income (and amount) over the last 3 years and projected income for the coming year.	
	3∙	What are your plans for financing beyond the current year?	
	4.	What is your requested grant amount from the Presbytery of New Hope Hunger for Change Fund? (Grants are limited to \$2,000)	
	5.	What do you plan to do with the Presbytery of New Hope Hunger for Change Fund if granted?	
	6.	How would these funds assist with your overall purpose?	
	7.	If you do not receive Hunger for Change Fund, what will the impact be on your project?	
	8.	Is your program currently participating in the Food Bank of Central and Eastern North Carolina or the Food Bank of the Albemarle? Yes No	

4. What has been accomplished?

New Hope Presbytery - Hunger Grant

Session Endorsement - 2024

Name of a	ngency/project:			
SESSION				
1.	How long has your church been working with the agency/project?			
2.	Describe how your congregation is involved with the agency/project.			
ENDORSI	<u>ENDORSEMENT</u>			
The Sessi Church	on of the			
of	, North Carolina has approved to endorse the			
agenc	y/project.			
Signed: _	(Clerk of Session or Pastor) (Date)			
	(Clerk of Session or Pastor) (Date)			
	ENDORSI The Sessi Church of agency			

*Note: If your project is located within the geographical boundaries of the Presbytery of New Hope, but **DOES NOT** have a Presbyterian Church located nearby, please have another church body endorse your project.

An **Accountability Report** MUST accompany your application if grant monies were received in any previous funding year.

Accountability Report

Name of agency/project:						
Name and title of contact pers	son:					
Phone Number:	Phone Number: E-mail:					
Session Endorsement from _ Church		Presbyterian				
Grant amount	Grant year from	to				
Purpose for which grant was	given					
2. Brief description as to	ssible, including who was assisted, number	r of persons assisted, what was				
3. How did this grant fit i	in with the overall purpose of your a	gency?				
4. How did it enable the p	project to be more effective?					
supporting churches of the Presby	videos that illustrate the use of these Hung tery of New Hope. Submit to: Shauna Vill igh, NC 27608 or svillela@nhpresbytery.c	ela at the Presbytery of New				
Reported by		Date				