

Name of Organization*			
Address*			
Address Line 1			
Address Line 2			
City		State	Zip Code
Contact Person*			
First Name	Last Name		
Email *			
Phone*			
Website*			

Organization and Proposal

Please give a brief description of your organization's mission and activities. *
Does the leadership of your organization reflect the people your organization serves? (i.e. race, ethnicity, socioeconomic status, shared experience, etc.) *
Please give a brief description of the project/activity for which you are seeking local CCHD funding. *
Please describe how many individuals the proposed activity would benefit, and any larger community impact it may have.*

How would the proposed activity address CCHD's goal of breaking the cycle of poverty through empowerment of individuals who are marginalized? *

Catholic Teaching

CCHD funds proposals that empower individuals to work for positive social change. Funded organizations are not required to identify with any particular faith tradition. However, CCHD requires that the organization's activities conform to Catholic teaching in that they promote respect for the sanctity of human life and protect the dignity of the human person.

Please take a moment to read the CCHD Basic Principles of Catholic Mission available online at this address: https://www.usccb.org/committees/catholic-campaign-human-development/cchd-basic-principles-catholic-mission and check below if you understand and comply with the principles:

I ha	ave rea	d and	l understand	CCHD's	policies	relating t	o non-partisan	activity and	Catholic teaching	. *
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Yes

No

CCHD stipulates that organizations engaging in any of the following activities are not eligible for funding:

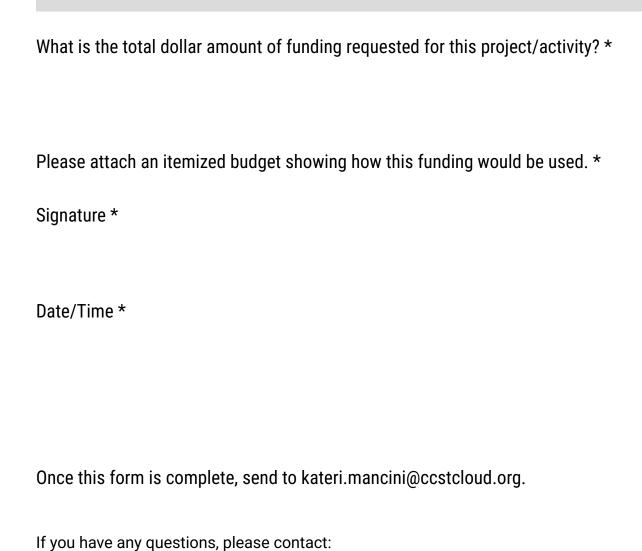
- Promotion or support of abortion, euthanasia, the death penalty, or another affront to human life
- and dignity.
- Activities that promote or support, violence, racism, sexism, or any other form of prejudice.
- Partisan political activities supporting a particular political party or candidate.

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Yes

No

Funding



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