

The Episcopal Diocese of Ohio
Episcopal Community Services 2230 Euclid Avenue
Cleveland, OH 44115

www.dohio.org

2017 Summer Youth Grant

Application Form

Deadline: May 31, 2017

Program Title:

Parish Name(s):

Address: _____ **City:** _____ **Zip:** _____

Phone: (_____) _____ **Email:** _____

Contact Person:

Address: _____ **City:** _____ **Zip:** _____

Phone: (_____) _____ **Email:** _____

Has the youth leader(s) received Safeguarding God's Children training? _____

If yes, please provide the youth leader(s) name and date of training. _____

Project Description:

Program Begin Date: _____ **End Date:** _____

Estimated number of youth to be served: _____ **from ages** _____ **to** _____

How will you publicize the program? _____

Amount Requested: \$ _____
Summer Youth Grants are limited to a maximum of \$500.00

Application must be returned with 2017 Actual Program Budget Form.

The Bishop's Annual Appeal
2017 Youth Summer Program Budget

To be used for all Youth Mission Trip and Summer Children/Youth Program grant application.

Income

Episcopal Diocese of Ohio Funding	\$ _____
Individual Donations	\$ _____
Fundraising Events	\$ _____
Parish Donations	\$ _____
Miscellaneous	\$ _____

TOTAL \$ _____

EXPENSES

Transportation, including gas and tolls	\$ _____
Meals	\$ _____
Program, including supplies	\$ _____
Lodging	\$ _____
Other, be specific	\$ _____

TOTAL \$ _____

Application and Program Budget Form may be emailed to Antoinette Taylor ataylor@dohio.org or mailed to the following address:

Episcopal Diocese of Ohio
Antoinette Taylor
Mission Office
2230 Euclid Avenue
Cleveland, OH 44115

2017 SUMMER CHILDREN & YOUTH OUTREACH PROGRAM PROJECT REPORT FORM

Please complete and return to Antoinette Taylor by Sept. 25, 2017 with the program budget. Thank you.

Program Name: _____

Sponsor Parish: _____

Contact Person: _____ **Phone:** _____

Explanation of how objectives were achieved:

How many people were served or affected by this program?

How were funds used?

Please attach program income and expense statement.

Signature of Contact Person

Date

You are encouraged to include one letter-sized copy of program photographs. Emailed digital photos are encouraged.

Please email your form to Antoinette Taylor at ataylor@dohio.org. You also can mail in your report along with any pictures to: The Episcopal Diocese of Ohio, Mission Office, 2230 Euclid Avenue, Cleveland, OH 44115. If you have questions, please feel free to call at 216-774-0476.