



## The Sisters of Perpetual Indulgence The Abbey of St. Joan

### Anniversary Grant Application 2024

Throughout the year, the Sisters of Perpetual Indulgence, The Abbey of St. Joan raises money by soliciting charitable donations at a variety of events. Each July, at the time of our anniversary, the Sisters celebrate the founding of the Abbey of St. Joan by giving away the money we've raised for our grants fund to charitable organizations in King County and throughout the State of Washington whose work is in keeping with the purposes of our organization as defined in our mission statement.

We invite organizations to apply for these grants by submitting information about their organization and the programs or projects for which they are seeking funding. For detailed instructions, read the *Anniversary Grant Application Instructions* below.

#### ANNIVERSARY GRANT APPLICATION INSTRUCTIONS

##### Eligibility Requirements for Funding:

1. An organization must have 501(c)3 non-profit tax status to be considered.

2. Grants to individuals will not be considered.

3. Projects must align with our mission statement:

*We are an order of Twenty-first Century nuns dedicated to the promulgation of universal joy and the expiation of stigmatic guilt. We work to raise money for HIV/AIDS charities: fight for queer rights and visibility: do safer sex outreach: and strive diligently to keep our sense of humor, never taking ourselves so seriously that we forget to have fun. We gladly welcome all races, creeds, genders, and sexual orientations.*

4. Projects must be operated within Washington State.

##### What we fund:

Historically we have funded smaller grass roots organizations whose focus is to improve and strengthen the GLBTQ communities. All applications will be considered as long as no more than 10% of funding is applied to administration costs (including travel and personnel), and the program will fit under one or more of the following headings: Gay, Lesbian, Bi, Trans, HIV/AIDS, Sexual Health, or Queer Empowerment.

**Maximum Grant:** \$1500.00

*The Sisters of Perpetual Indulgence, Abbey of St. Joan have a commitment to the entire GLBTQ community. There will be no guarantee of continued funding for agencies or projects who receive money in this Grant Cycle. Applications received by June 21, 2024 will be considered for Summer 2024 distribution only; all future disbursements will require new applications.*

##### Application Instructions :

1. Complete the Sisters of Perpetual Indulgence - Abbey of Saint Joan Grant application. The form must be completed electronically and returned in either Microsoft Word or PDF format (email to [grants@theabbey.org](mailto:grants@theabbey.org)).
2. Use no more than three (3) pages to answer the questions in the “We’d like it in your words ...” section of the application, with 12 point font and standard one inch margins.
3. Include a copy of your IRS 501(c)3 letter in Microsoft Word, JPEG, or PDF format.
4. Include a complete budget for the project for which you are seeking funding, in which it is clear where this grant fits in. Submit in either Microsoft Word, Microsoft Excel, or PDF format.
5. All applications must be **received** by midnight, June 21, 2024. Incomplete or late applications will not be considered.

Electronic applications must include the application form and electronic copies of supporting documents in a single email message to **grants@theabbey.org**.

Electronic applications via email are required. Physical applications by post will not be considered.

**Questions?** Questions about the application process may be directed to **grants@theabbey.org**.

***The application begins on the next page ...***

**Organization Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Contact Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Name of project that grant money will benefit:** \_\_\_\_\_

**Amount Requested:** \_\_\_\_\_ **Total Project Budget:** \_\_\_\_\_

**Project Focus: (check all that apply)**

\_\_\_\_\_ Gay/Bisexual Men    \_\_\_\_\_ Lesbian/Bisexual Women    \_\_\_\_\_ Transgender

\_\_\_\_\_ LGBTQ Youth    \_\_\_\_\_ HIV/AIDS    \_\_\_\_\_ Sexual Health    \_\_\_\_\_ Queer Visibility

**Region of Focus:**    \_\_\_\_\_ King County    \_\_\_\_\_ Other area in WA State

**We'd like it in your words ...**

**Please describe your project (and be as specific as possible):**

\_\_\_\_\_

**Who will be helped?**

\_\_\_\_\_

**Why is it important?**

\_\_\_\_\_

**Why is your organization qualified to conduct this program?**

**How will this program fit in with the Sisters' mission?**

**How will you measure the success of this project?**

**What, specifically, will our grant funds be used for within the project budget?**  
(Please attach a complete budget, in which it is clear where this grant would fit in.)

***To the best of my knowledge, all information in this application is true and correct.***

**Printed name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_