Submittal Info: midohiosdop@gmail.com

Deadline: October 15, 2023
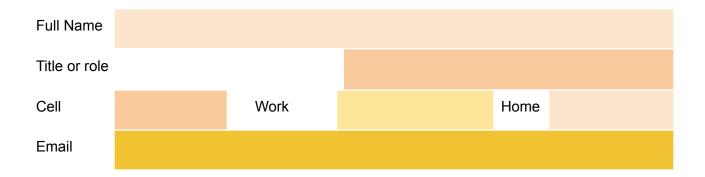
MID-COUNCIL SDOP COMMITTEE GRANT APPLICATION

Name of Project	
Organization	
Organization Phone Number	
Organization Email	
City, State, Zip Code	
Name of individual completing this application	
Email address	
Phone Number	

PRIMARY CONTACT PERSON - (This person has capability to reach members and answer questions about the project)

Full Name	Contact person		
Title or role			
Cell		Work	Home
Email			

Secondary CONTACT PERSON (This person is able to support primary contact when necessary)

Full Name			
Title or role			
Cell		Work	Home
Email			

SDOP Core Strategies:
- **Promote justice**
- **Build stronger communities**
- **Seek economic equity**

Projects considered must:

- Be presented, owned, and controlled by the group of economically poor people who will benefit directly from it.
- Address long-term correction of conditions that keep people bound by poverty and oppression.This will utilize some combination of the SDOP core strategies to promote justice, build solidarity, advance human dignity and advocate for economic equity.
- Be sensitive to the environment while accomplishing its goal(s) and objectives.
- Not advocate violence as a means of accomplishing its goal(s) and objectives.

Proposal Information

Amount Requesting	$
TELL US ABOUT THE PROJECT ● Describe the project and why it's needed ● How did the group come together? ● How will these project members benefit directly from this project? ● What will be different for members with implementation of this project? ● Objectives (what specific steps the group will take to accomplish the goal(s)) ● Describe community resources that may be available to support this project, with a description (community programs, businesses, in-kind gifts) ● When does the project start and end? ● Evaluation - describe what is considered a success at the end of this project. ● Note: The grant participants (decision members) must not be less than five for this project.	
Type description of project in this box, which will expand.	

DECISION MAKERS

1. At least five decision makers must be engaged to submit proposals.
2. Required: majority of decision makers must identify as low income or unemployed

Name	Ethnic Background	Job/Occupation (if applicable)	Indicate How Member Was Chosen **Elected (E), Appointed (A) or Self-Selected (S)**

BUDGET

A balanced income and expenditure budget must show expected income and expenditures over the funding period of the project.

Source	Amount
SDOP (Requested funds)	$
Individual Cash Donations	$
In-kind (goods or services provided at no charge)	$
Fundraising Events	$
Other	$
Total	$

EXPENSES - Project Costs

Item	Purpose/relationale	SDOP	Other Funding Sources
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
Total			

Balance Budget - The above listed income and expense totals must be equal.

Income	$
Expenses	$