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| Note: After completing the application, save the file and add the applicant name to the end of the file name. |
| 1. Name of Region & Region Number: | **Grant Funding Cycle:** |
|       | [ ] Jan-Mar [ ]  Apr-June [ ] July-Sept [ ]  Oct-Dec  |
| 2. Name of Applicant (if other than the Region): | **# of Members in Region:** |
|       |       |
| 3. Name of Contact Person #1: | **Email Address:** | **Phone Number:** |
|       |       |       |
|  Name of Contact Person #2: | **Email Address:** | **Phone Number:** |
|       |       |       |
| 4. Name & Address where award check should be mailed: |
|       |
| 5. Grant Description: |
|  |
| A. Purpose and goals of event. |
|       |
| B. Intended audience. |
|       |
| C. Outline of Program, presentation and/or event. |
|       |
| D. Relevant information on presenters. |
|       |
| E. What are the anticipated results or benefits of the event? |
|       |
| 6. Detailed estimate of the cost of this event. Round amounts to the nearest dollar |

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| A. Costs related to the team and presenters: |
| If Applicable | # Team Members | Cost Per | Amount | Notes |
| Travel |       |       | $ |       |       |
| Lodging |       |       | $ |       |       |
| Meals |       |       | $ |       |       |
| Supplies |       |       | $ |       |       |
| Stipends\*\* |       |       | $ |       |       |
| Other (list detail) |       |       | $ |       |       |
|       |       |       | $ |       |       |
|       |       |       | $ |       |       |
| TOTAL COST FOR PRESENTERS | $ |       |  |
|  |
| B. Costs related to attendees: |
| If Applicable | # Attendees | Cost Per | Amount | Notes |
| Travel |       |       | $ |       |       |
| Lodging |       |       | $ |       |       |
| Meals |       |       | $ |       |       |
| Supplies |       |       | $ |       |       |
| Stipends\*\* |       |       | $ |       |       |
| Other (list detail) |       |       | $ |       |       |
|       |       |       | $ |       |       |
|       |       |       | $ |       |       |
|       |       |       | $ |       |       |
| TOTAL COSTS FOR ATTENDEES | $ |       |  |
|  |
| A + B = TOTAL COST OF EVENT | $ |       |  |
|  |
| \*\* The DSFF considers a stipend to be a monetary gift *over and above* the amount given to cover a person’s expenses. Examples of a stipend would be (1) a gift of money that should always be given to a Spiritual Assistant and other persons who provide services at an event, or (2) a “speaker’s fee” that a presenter might expect.Note: Reasonable costs for travel, lodging and meals for OFS members, Spiritual Assistants and others, who fulfill a particular function at an event, should always be covered. |
|  |  |
| 7. Financial Information |   |
|  Amount to be contributed by Attendees | $ |       |       |
|  Amount to be contributed by Region | $ |       |       |
|  Amount to be contributed by Local Fraternities | $ |       |       |
|  Amount requested from DSFF | $ |       |       |
|  Total Cost of Event (must be same as #6 above) | $ |       |  |
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| 8. I acknowledge that within 60 days after the completion of the event, DSFF requires a written summary of the outcomes, including a detailed financial report.By checking this box, I agree to comply [ ]  |
| 9. Signatures |
| X      |      **X** |
|  Regional Minister Signature | Date |  Formation Director Signature | Date |
|      X |      **X** |
| Applicant Signature (if applicable) | Date |  | Date |