



Seeds of Hope Social Justice Grants

Administered by the First Congregational Church of Madison Foundation, Inc.
Applications Open: January 15, 2023
Application Deadline: March 1, 2023

The Seeds of Hope Social Justice Grants Committee welcomes proposals from organizations in Dane County for innovative programs and initiatives that advance social justice in ways consistent with the United Church of Christ's missions. The grants are open to community-based organizations, neighborhood groups, cooperatives, nonprofits, faith groups and others who are working to make Dane County's communities more just and equitable for all. Applications are especially encouraged from groups led by members of traditionally marginalized communities and groups which do not have access to other grant making programs. Priority will be given to collaborative projects that bridge racial, economic or other social divides. Successful proposals will address pressing concerns in Dane County including but not limited to:

- meeting basic material needs
- promoting equality for marginalized communities
- addressing disparities in health and healthcare
- advancing equity in education, disability rights, and more
- delivering environmental justice

The United Church of Christ is a progressive, Just Peace, Open & Affirming, Accessible to All denomination. For more about the United Church of Christ's social justice missions, please visit www.ucc.org/justice. 501(c)(3) status is not required, but groups without 501(c)(3) status will need a partner organization to act as a fiscal partner.

Grants are for one year, and applicants may request up to \$25,000. Grants are not available to individuals.

Available Awards

Tier I: Awards up to \$2,500 annually

Tier II: Awards greater than \$2,500 but no more than \$10,000 annually Tier III: Awards greater than \$10,000, but no more than \$25,000 annually

Please direct questions to seedsofhope@firstcongmadison.org.





Seeds of Hope Social Justice Grants

Application Deadline: March 1, 2023

Thank you for applying for a Seeds of Hope Social Justice Grant. Please provide complete answers to the application below. Applications can be returned electronically to seedsofhope@firstcongmadison.org, or mailed to

Seeds of Hope c/o First Congregational Church of Christ, Madison 1609 University Avenue Madison, WI 53726-4040

Need a hard copy of this application mailed to you? Have questions or other need assistance? Please contact seedsofhope@firstcongmadison.org.

Information About Your Organization Name of Group: Address: Phone Number: Name of Primary Contact Person: Primary Contact Phone: Primary Contact Email: Preferred Method of Contact:

How did you hear about this grant? (one sentence)
What is your group's mission or purpose? (one to two sentences)
Provide a brief summary of your group's story. When and how did it come to be? (1 paragraph)

Information About Your Project or Activity

Project Title:

Provide a description of the project(s) or activities that would be funded with this grant. Be sure to include the following:

- What is the project or activity?
- Is this a one-time event or activity or an on-going one?
- What is the purpose of the project? How does it foster social justice in the community?
- What need or gap in the community will this project fill?
- Who (or what population(s)) will be served by it?
- Who will run or organize it? (Include the roles of partner groups or organizations if applicable.)

Is this a new project for your group? If no, please summarize what the project has accomplished so far and what these additional funds would help you achieve. Please tell us how the project is currently funded. Additionally, if you previously received a Seeds of Hope grant, please tell us how you have used the funds so far and how you see additional funds allowing you to build on the work you have done so far. (1-2 paragraphs)
If it is part of an ongoing program, please tell us your plan for funding the project when this grant is complete.

Timeline

What is your schedule for completing the part of your project that this grant would support? Use the worksheet below to give us a sense of your timeline.

Date	Activities Taking Place at this Time
Project Start Date:	
Approximate Halfway Point:	
End Date:	

How will you measure the success of this project?

Fir	nancial Information		
ls :	your group a 501(c)(3)? □Yes	□No	
-	ves, please include a copy of the Inter ur organization's 501(c)(3) status.	rnal Revenue	Service determination letter indicating
ls	your group a registered co-op?	□Yes	□No
-	res, please include a copy of the artic operative status.	les of incorpo	ration indicating Wisconsin Chapter 185
-	your group is not a 501(c)(3), or a cants, but we'll need some more inforr	-	you are still welcome to apply for these port your application.
1.	Tell us how your group manages its	funds. (2-4 se	entences)
2.			hat can act as your fiscal partner to assist nt budget can include funds for technical
	Partner Organization Name and Cor	ntact Informati	ion:
3.	so, please provide that person's nan	e who can ac ne and contac	ere someone in the community with tot as a mentor or coach to your group? If tot information below. If not, please indicate for technical assistance you might need.)
	Organizational Mentor's Name and O	Contact Inform	nation:

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HOW	ıs	vour	aroun	Currentiv	/ funded?
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What is your group's total annual budget?

Please provide an estimate of cost of the project for which you are seeking funding. Feel free to use this worksheet or attach your own.

Brief Description of Expenses	Total
0 1 0	
e.g., Supplies or Personnel	
Total Project Cost	
Amount You Are Requesting From Seeds of Hope	

Does your group have, or expect to have other sources of funds besides a Seeds of Hope Grant?

Funding Source	Amount	We have applied for or hope to raise these funds	We have secured these funds

Is there any more information you feel the grant committee should know about your group or this project?

Thank you for your application!