

# Catholic Campaign for Human Development 2024 Local Grant Criteria and Guidelines for the Diocese of Des Moines

Guidelines:

**Applicants must fall into one of two categories:**

1. Non-profit organizations serving underprivileged communities and/or populations with specific project needs.
  - Must fill in a need in the local community.
  - Must demonstrate a willingness to collaborate with other organizations within the community to address needs.
  - Must have a current 501(c)(3) status.
  - Must serve one of the Seven Corporal Works of Mercy (see below).
  - Must adhere to Catholic Social Teaching (see below).
  - Must operate in the geographic area of the Diocese of Des Moines.
  - Must have a clear organization structure and financial stability (financial reporting will be requested).
2. Parish-based service projects serving low-income and/or underserved members of their communities.
  - Must fill a need in the local community.
  - Must demonstrate a willingness to collaborate with other parishes, faith-based communities, and local organizations within the community to address needs.
  - Must serve one or more of the Seven Corporal Works of Mercy (see below).
  - Must adhere to Catholic Social Teaching (see below).
  - Must have the financial support of the parish and local community as evidenced through regularly occurring monetary and in-kind donations.
  - Must be a parish of the Diocese of Des Moines.
  - Must have a letter of support from the parish pastor and/or parish council.

## **General Criteria for All Applicants**

1. Low-income communities or underserved/underprivileged communities must be the primary focus of the project.
2. Applicants should be making an effort to engage the impacted community members in its mission, service, and future planning.
3. Applicants with a partisan political focus or a government-run organization will **NOT** be considered.
4. For-profit organizations will **NOT** be considered.
5. Applicants' projects must focus on at least one of the Seven Corporal Works of Mercy, including:
  - Feeding the Hungry
  - Giving Drink to the Thirsty
  - Clothing the Naked
  - Sheltering the Homeless

- Visiting the Sick
  - Visiting the Imprisoned
  - Burying the Dead
6. Applicants must also adhere to Catholic Social Teaching, including:
- Life and Dignity of the Human Person
  - Call to Family, Community, and Participation
  - Rights and Responsibilities
  - Option for the Poor and Vulnerable
  - The Dignity of Work and the Rights of Workers
  - Solidarity
  - Care for God's Creation

Application Timeline:

1. Applications will be accepted starting October 1, 2024, via email, online submission, or postal mail.
2. Application deadline is November 25, 2024.
3. Applicants may request grants of up to \$4,000.
4. Applications will only be accepted if fully complete and all documents are included.
5. Site visits will begin in December 2024.
6. Grantees will be notified of any award by February 2025.
7. **Non-profit based grants** must include the following:
  - Copy of the most recent operating budget
  - Copy of IRS Tax Exempt form
  - Copy of the current board, including any community members who are involved in planning
  - Copies of program literature and/or marketing materials
  - Completed grant application
8. **Parish-based grants** must include the following:
  - Operating schedule
  - Volunteer schedule
  - Statement of support from the parish council or parish pastor
  - Photographs of operation and copies of bulletin advertisements
  - Copy of the operating budget, including any parish monetary or in-kind fundraising drives
  - Completed grant application

# CCHD Annual Grant Application Form 2024

Application deadline: **November 25, 2024**

Name of Organization: \_\_\_\_\_

Address:

\_\_\_\_\_

Organization's website (if any): \_\_\_\_\_

Contact Person for this application: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

What is the name of the project? \_\_\_\_\_

What is the cost of the entire project? \_\_\_\_\_

2a. Amount of your grant request? \_\_\_\_\_ (Maximum \$4,000)

Has your organization received funding from CCHD-DSM in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state:

Year \_\_\_\_\_ and Amount \$ \_\_\_\_\_ for that year

Year \_\_\_\_\_ and Amount \$ \_\_\_\_\_ for that year

Year \_\_\_\_\_ and Amount \$ \_\_\_\_\_ for that year

Does your organization support anything that is contrary to Catholic Social or Moral Teaching (see CST 101 videos at <https://www.usccb.org/beliefs-and-teachings/what-we-believe/catholic-social-teaching/cst-101>)

(NOTE: This includes receiving funding, providing funding, or being in partnership with another organization that violates Catholic social and moral teaching)

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain involvement that is contrary to CST:

Is your organization:

- Incorporated as a non-profit under state law? Yes \_\_\_\_\_ No \_\_\_\_\_
- A recognized 501(c)(3) tax-exempt organization? Yes \_\_\_\_\_ No \_\_\_\_\_
- A social service ministry of your Parish? Yes \_\_\_\_\_ No \_\_\_\_\_

Please provide a brief description of your organization and overall funding (no more than 500 words, single spaced, and font size 12):



Please provide a brief description of your project (no more than 500 words, single spaced, and font size 12). Be sure to include how this project meets one of the first 2 criteria given in the instructions sheet, its goals, persons who will benefit from the project, community support, expected outcomes, and how the program will be funded beyond this grant).



Please provide project budget information and a breakdown of how the funds will be used; for example, for supplies, towards a staff person's salary, etc. (Provide project budget only, NOT a budget for the organization.)

Amount requested: \$ \_\_\_\_\_

Expense Item	Cost to grant funds	Balance of grant left
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTALS: \_\_\_\_\_ | \_\_\_\_\_

On behalf of the organization applying for this grant, I certify that the funds will be used for their intended purpose as described in this application.

Applicant's signature: \_\_\_\_\_

Position: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Return this Application Form via postal mail or as PDF by Email to:

John Huynh, D.Min.  
Director of Social Justice  
Diocese of Des Moines and Catholic Charities  
601 Grand Avenue  
Des Moines, IA 50309  
Email: [jhuynh@dmdiocese.org](mailto:jhuynh@dmdiocese.org)