

Mother Teresa Endowment Application

This Endowment's purpose is to assist pastorates or apostolates in establishing sustainable, community-driven initiatives to assist expecting mothers.

Contact Information of Individual Requesting Funds

First & Last Name: _____

Phone Number: _____

Email: _____

Name of Apostolate/Initiative: _____

Address

Street Address: _____

Street Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Request

Amount I'm Requesting: \$ _____

Please submit a proposal of the initiative in addition to this application. Note that all grant applications must have a signed Pastor recommendation.

Additional Pastor Comments:

Signature: _____ Date: _____

Pastor Signature: _____ Date: _____

*By signing this document, I am aware and recommend this application request.

To submit your request you can scan the completed form and email it to discipleship@sfcatholic.org, or simply mail it to us at:

Catholic Diocese of Sioux Falls
Attn: Office of Discipleship & Evangelization
523 N Duluth Ave
Sioux Falls, SD 57104

