



Diocesan Council, Diocese of Cleveland
Society of St. Vincent de Paul

1404 East 9th Street Cleveland, Ohio 44114 | 216.696.6525 x3150 | F: 216.861.3200 | svdpcl.org

APPLICATION FOR FINANCIAL ASSISTANCE 2015

for Conferences with financial hardships and/or new projects

Conference: _____

Conference address: _____

Contact name for this application: _____

Contact phone: _____ E-mail: _____

Amount requested*: _____ Amount received last year: _____

*Maximum Request of \$5,000

1. Please attach a copy of your 2014 Annual Conference Report.
2. Make certain your Conference President signs this form.
3. If funded, you agree that grant monies will be used for the poor, needy and disadvantaged in your area.
4. Be sure all questions are answered. Incomplete applications may be rejected.

We respectfully request this funding for (check all that apply and include narrative):

- Emergency Assistance
- Food/Meal Assistance
- Transportation Assistance
- A New Project
- Other

Description of need or project:

(Attach additional sheets if necessary)

Print name of President: _____

President Signature: _____

Date: _____