



EPISCOPAL
DIOCESE
of Southern Virginia

Safeguarding Grant Request

The Safeguarding Grant fund was created to assist small churches in the Episcopal Diocese of Southern Virginia in meeting compliance standards for the Policy for the Protection of Children, Youth, and Vulnerable Adults. The funds can be used to assist with fees for background checks and credit checks, as well as equipment needs to achieve policy compliance. To be eligible to request this grant the following conditions must be met:

- Per Diocesan Canon VII.4(f) congregations, including clergy and lay members, will not be eligible for grants from the Diocese until the preceding two calendar years' financial audit reports have been provided to the Diocese.
- The most recent year's Congregational/Organizational Safe Church Annual Audit has been submitted to the diocese.

Date of Application: _____ Church Name: _____

Church Address: _____

Church Phone: _____ Rector/Sr. Warden: _____

Number of active communicants in good standing: _____

Name of Person Submitting Grant Request: _____

Telephone: _____ Email Address: _____

Please indicate what the requested funds will be used for:

_____ Background checks for _____ individuals

_____ Credit checks for _____ individuals

_____ Equipment needs (provide a detailed description below)

_____ Other (provide a detailed description below)

Description:

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Funding Request Breakdown:

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|---|----------|
| Subtotal of anticipated costs for background checks | \$ _____ |
| Subtotal of anticipated costs for credit checks | \$ _____ |
| Subtotal of anticipated costs for equipment needs | \$ _____ |
| Subtotal of anticipated costs for other expenses | \$ _____ |
| Total | \$ _____ |
| | |
| Amount that your congregation is contributing | \$ _____ |
| Amount that you are requesting in grant | \$ _____ |

If there are extenuating circumstances that prevent your congregation from assisting with funding please describe in detail:

If you have you previously received Safeguarding Grant funds please list the date(s) and the amount(s) received:

Date: _____ Amount received: \$ _____

Date: _____ Amount received: \$ _____

By signing below I verify that if grant funds are awarded they will be used exclusively as outlined in this application. I further acknowledge that, if requested, I will provide receipts documenting the use of the funds as outlined in this application or will be required to reimburse the Diocese of Southern Virginia for the grant award.

Applicant's Signature: _____

Rector / Sr. Warden Signature: _____

Safeguarding Grant Requests should be submitted to the Canon for Formation