



*The Spirit of the Lord is upon me, therefore, he has anointed me to bring glad tidings to the poor, to proclaim liberty to captives, recovery of sight to the blind, and to let the oppressed go free.  
(Luke 4:18)*

*As members of an international congregation, we recognize our obligation and opportunities to develop a world vision and a sense of global responsibility.*

*Our internationality challenges us to witness to unity in a divided world;  
to discover unsuspected ways of sharing what we have,  
especially with the poor and marginalized.  
(You Are Sent C26)*

## Purpose:

The Gospel Fund of the Atlantic-Midwest Province was established to assist in the financing of projects whose goals are consistent with our congregational mandate to reverence all creation and make the concerns of those made poor our own. The four priorities that are important for your application and that are listed below, are derived from SSND directives and mission focuses found in *You Are Sent (YAS)*, the Constitution and General Directory of the School Sisters of Notre Dame; [Love Gives Everything](#), the Directional Statement from our 24th General Chapter, 2017; and our congregational commitment to be a [Laudato Si' congregation](#).

**As School Sisters of Notre Dame, we**

- a) are sensitive to youth and women (YAS C24);
- b) prefer the poor (YAS C24);
- c) are concerned for the establishment of a just society (YAS GD33);
- d) educate, advocate, and act in collaboration with others for the dignity of life and the care of creation (*Love Gives Everything*).

## Gospel Fund Application Process:

**Application:** Projects that are consistent with the above mission priorities will be considered. The maximum amount granted to any one project is \$7,500 in a calendar year. Note: SSND sponsored and co-sponsored ministries are potentially eligible for project funding through the AM SSND Mandate for Mission fund, not the Gospel Fund.

Applications must be received electronically on or before October 1 to be considered. All applications, along with endorsement forms, should be submitted to [GospelFund@amssnd.org](mailto:GospelFund@amssnd.org)

**Endorsement:** Applications can be endorsed by a Sister, Associate, or SSND staff member of the Atlantic-Midwest Province of the School Sisters of Notre Dame or a staff member of its co-sponsored and sponsored ministries – those who know and understand the mission of SSND.

The endorsement should be emailed with the application. Please fill out the [endorsement form](#) electronically.

**Committee:** The Gospel Fund Committee reviews all applications and makes decisions about the disbursement of funds. The Committee consists of one member of the SSND Provincial Council, the Director or Associate Director of the Justice, Peace, and Integrity of Creation (JPIC) Office, and five additional members of the Atlantic-Midwest Province. The committee meets in October of each year to make decisions and distribute funds. A report on the distribution of funds is published on the [AM Gospel Fund webpage](#).

**Follow-up Report:** Recipients must submit an online report of how funds were used no later than one year after the receipt of grant funding. If you want to apply again October 1, please email your report by September 1. The reporting form can be found on the [AM Gospel Fund webpage](#).

**THE FORM IS FILLABLE.  
ALL SECTIONS MUST BE FILLED IN.**

Download the form to your computer and save it. The form is a fillable pdf. That is, you can type directly into the response boxes. **Please note that the boxes have fixed word limits where indicated.** To navigate to each area on the form, hit the tab key. Remember to hit save when you are finished. If you need assistance with any part of this application or have questions, please contact [gospelfund@amssnd.org](mailto:gospelfund@amssnd.org).

All eligible applications received on or before November 1 will be considered.

**Date:** \_\_\_\_\_

## Organization Information

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

**Contact Person:** \_\_\_\_\_

**Mailing Address: Street/PO Box:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Phone or WhatsApp:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Are you a 501(c)(3) non-profit organization: yes \_\_\_ no \_\_\_

**Grant amount requested:** \_\_\_\_\_

**Check payable to:** \_\_\_\_\_

If the money is to go to a country outside of the USA, a check will not be issued. We will contact you for banking information if the award is granted.

# Organization and Project Description

Please provide background information on your organization, including a website if available; be brief. Note the word limit for each expandable block. What is the mission of your organization?  
**(150-word limit)**

What population/s does your organization serve (e.g., age, ethnicity, socio-economic status)?  
**(150-word limit)**

Is the project for which you are seeking funding a new project or an ongoing project ?

What needs does this project seek to address? **(250-word limit)**

Additional information: **(200-word limit)**

**Project Goals**

Describe up to three (3) measurable goals for this project that will meet the needs you described above. **(150-word limit each)**

1.
2.
3.

If applicable, give the project **Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

## SSND Mission

Please respond to these priorities as they pertain to your project. Identify by “a, b, c, or d” in your description. **(400-word limit)**

- a) Shows sensitivity to the needs of “youth and women” (YAS C24);
- b) Gives preference to serve “the poor” (YAS C24);
- c) Demonstrates concern “for the establishment of a just society” (YAS GD33);
- d) “Educates, advocates, and acts in collaboration with others for the dignity of life and the care of creation” (*Love Gives Everything*).

## Endorsement

Give the **name** of the Sister, Associate, or staff member of the SSND Atlantic-Midwest Province or a staff member of its co-sponsored or sponsored ministries who will provide the endorsement. (Use the [endorsement form](#) and include it as a separate document when submitting the applicati

Name: \_\_\_\_\_

## Financial Statement

### TOTAL ORGANIZATION Financial Overview:

Include your most recent audited statement. If an audited statement is not available, use the following grids for revenue and expenses pertaining to your overall organization.

Organizational Revenue	Amount
Grants and government funding	
Fundraising	
Donations - Unrestricted	
Interest	
Other	
<b>Total Organization Revenue</b>	

Organizational Expenses	Amount
Salaries	
Benefits	
Operational costs	
Rent	
Other	
<b>Total Organization Expenses</b>	

### TOTAL PROJECT Financial Information:

Please attach your project budget for the grant money you are requesting or paste it into the pages following.





