## Working Woman's Home Association 2023 Grant Application

Within the City of Montgomery and its environs, the intent and purpose of the Working Woman's Home Association is:

- 1. To aid and assist distressed and abused women and children
- 2. To aid in the education of women to the end that they may become self-sufficient
- 3. To aid and assist women in providing emergency housing
- 4. To aid and assist elderly persons, particularly women, in meeting their basic needs

Instructions: Please complete the following questions and submit form at the end. This form allows information from another document to be inserted or pasted in the question response space. It is also possible to edit information on the form after submission.

Email attachments to secretary@wwhassn.org.

\*\* This grant application is requesting funds to be awarded in January 2023. NO grant applications will be able to be submitted after the deadline - 5:00 pm on Monday, June 13, 2022.

Name of Organization/Agency *	
Catholic Social Services	
Address *	
4455 Narrow Lane Road	
City, State, and Zip *	
Montgomery	

Website Address *
cssalabama.org
Executive Director Name *
Deacon Raymond Gueret
Telephone *
334-288-8890
Email address *
director@cssalabama.org
Project or Program Proposal Contact Person (if different from above)
Raymond Gueret
Telephone
3342888890
Email Address
director@cssalabama.org

Briefly state the purpose and goals of this project or program. *  Part of the mission of Catholic Social Services of Montgomery (CSSM) is to mirror the loving care and concern of Christ for those in need. The Medical Assistance Program, administered through the Direct Aid and St. Margaret Services provide direct access to life-sustaining medications for those in need, most-distress and abused, children, frail elderly widows, and women who without our assistance, may go without some life essential needs.  Briefly describe your plans for administration of this project or program request? *  Our Direct Aid staff and St. Margaret's staff are charged with evaluation and distribution of funds with financial controls.  How will you evaluate the success of this project or program? Or how have you evaluated the * success of this project or program by the number of needy people we are able to provide much needed medications.	Funding Requested *
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	success of this project or program in the past?

This project or program will impact Montgomery in the following areas (check all that apply)	*
✓ Distressed and abused women and children	
Education of women and life skills development	
Emergency housing for women and children	
Assist elderly persons, particularly women, in meeting their basic needs	
Other: Provide much needed medications to those most in need.	
How does this project or program funding request fit into your organization's mission and, more specifically, the mission of your project or program?	*
The mission of CSSM is to mirror Christ's love and concern for those most in need.	
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How does this project or program funding request fit into the mission of the Working	*
Woman's Home Association? (stated at top of form)	
The program is designed to assist the most needy, distressed and abused women and children, to assist with some financial management if necessary, assisting the elderly to be as independent as possible by	
providing nourishing food as well as medication and comfort.	
Will this project or program initiate a new service in Montgomery? *	
Yes	
● No	

If not, explain the features of this project or program that distinguish it from other organizations in Montgomery that provide the same or similar services. Identify those organizations in Montgomery providing the same or similar services.  River Region United Way agencies
How many people will be served by this project or program funding request? *  500
Will a grant from the Working Woman's Home Association enable your organization to receive * matching funds?  Yes  No
Is there another resource that can assume financial responsibility for this project or program * upon completion of the commitment of the Working Woman's Home Association?   Yes  No
List other organizations or grants from which you have requested funding for this project or program and the status of such requests.

River Region United Way, Catholic Charities Appeal

In addition to submitting this project or program funding request, the documents below are required for this application to be accepted as complete. Please email current documentation in PDF format to: <a href="mailto:secretary@wwhassn.org">secretary@wwhassn.org</a>. (You may check the box below when the item has been emailed.)

- Detailed proposed budget for this project or program request
- Proposed budget for your organization for the current year
- Copy of Statement of Revenues and Expenses and Balance Sheet for the current and most recent fiscal year completed for your organization
- Copy of your most recent audit. If an audit is not available, please include a copy of your most recent 990 form
- ✓ List of Officers and Directors
- Copy of your IRS Letter of Determination of 501(c)(3) status

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