

# National Funeral Directors Association FUNDING GRANT APPLICATION 2007

### **General Instructions**

- 1. Only this funding grant application form will be accepted for review by NFDA.
- 2. Provide all information in the order listed.
- 3. Provide three copies of all materials, organized into three individual sets.
- 4. Applications must be typed in 12-point font with one-inch margins, single-spaced, and single-sided.
- 5. Mail materials that are specifically requested only.
- 6. Applications must be mailed. Faxed or emailed applications will not be accepted.
- 7. Retain copies of all materials submitted; they will not be returned.
- 8. Only complete applications will be reviewed.
- 9. Individual critiques of applications that are not approved will not be provided.
- 10. At all stages of the review process, personal contacts with staff or board members are strongly discouraged. You may fax any questions you have regarding the process to the NFDA Funding Grants Program at 1-262-789-6977. Include your name, organization, address, telephone, email address, and fax number.

### **Selection Criteria**

Funding grants that are determined eligible will be evaluated based on the following criteria:

#### **Characteristics and Need for Project**

- Project relation to clear and compelling need in funeral service
- How the funeral service need will be addressed by the project
- National importance of project to funeral service
- Specific objectives, tasks, and end product(s)
- Applicant's qualifications to carry out the project
- What will be gained by the undertaking
- Urgency of the project
- · Appropriate budget

#### **Impact of the Project**

- How project will lead to tangible benefits to funeral service
- How completed project will contribute to NFDA's strategic goals
- How results will be implemented in the future

### Conditions

- The grant applicant understands and agrees that any award of a grant is within the sole discretion of NFDA.
- 2. The grant recipient grants to the National Funeral Directors Association first North American Serial Rights for the project, including, but not limited to, the perpetual license to copy, publish, distribute, sell and use any and all parts of the project in a derivative work or collection of works.
- 3. The grant recipient represents and warrants to NFDA that the project will be the sole, exclusive and original work of the recipient, except for such excerpts from copyrighted works as may be included with permission of the copyright holders thereof. Recipient warrants that the project shall not infringe upon any copyright, trademark, patent, statutory or proprietary rights of others in an intellectual property or otherwise. The recipient further warrants that the project will not contain any libelous or slanderous statements or material and that no part of the project shall violate any federal or sate antitrust or restraint of trade laws.
- 4. Awards shall be paid to grant recipients in installment payments to be determined by NFDA after consultation with the recipient.
- 5. The grant recipient will provide periodic progress reports and a final report upon completion of the project to NFDA. After consultation with recipient, NFDA will establish a schedule for the periodic and final reports as a condition of the grant.
- 6. Recipient understands and agrees that NFDA may require the recipient to enter into further agreements as a condition of receiving the grant.

Go to following page, "Funding Grants Application Form."



# **FUNDING GRANTS APPLICATION FORM**

National Funeral Directors Association

Provide all information in the order listed.

	Part 1. ADMINISTRATIVE INFORMATION					
1. Title of Project	Tatt I. ADMINISTRATIVE IN GRIMATION					
2. Amount Requested						
3. Name of Applicant						
4. Applicant's Title						
5. Organization						
6. Street Address						
7. City/State/Zip						
8. Email Address						
9. Telephone	Fax					
10. Legal Name of Employer						
11. Chief Executive Officer						
12. IRS 501 (c) ( 3 ) Nonprofit	Yes No					
13. Employer Street Address						
14. Employer City/State/Zip	Employer Telephone					
15. Period of Grant	to					
The undersigned hereby certifies the	at the information set forth in this grant application is true and correct.					
Signature						
Print Name and Title	Date					
	Dort 2 NARRATIVE					
	Part 2. NARRATIVE					
Please provide the following information one above.	rmation in the order presented below in no more than six pages. See General Instructions for guidance on page					
A. Door to and Alberton and	Describe proposed project in 3-5 sentences, how it relates to NFDA's mission, capacity to complete the					
A. Project Abstract	project, and who will benefit from the project.					
	project, and who will benefit from the project.					
	Explain the specific aim and scope of the project including its strategic link with NFDA.					
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B. Project Description	<ol> <li>Explain the specific aim and scope of the project including its strategic link with NFDA.</li> <li>Explain qualifications of applicant(s) and key personnel (if any) to carry out the project.</li> <li>Describe the expected outcomes and indicators of these outcomes.</li> <li>Describe how the results will benefit funeral service nationally.</li> </ol>					
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<sup>\*</sup>When there are co-applicants: submit completed duplicates of parts 1 and 4 of this application.

#### Part 3. PROJECT BUDGET

Please provide the following information in the order presented below. research of the grantee. Attach a page if necessary to include all revenue.	All	funds must be used only for exp	enditures directly renses.	elated	I to the		
Name of Project							
PROJECT REVENUE							
Revenue Sources	\$	Revenue Amount \$	<u>Committed</u>	\$	<u>Pending</u>		
				_			
Total Project Revenue	\$	\$		\$			
PROJECT EXPENSES							
<u>Itemizations</u>	\$						
Total Project Expenses	\$						

Note: Total revenue and total expense amounts should match.

## Part 4. CURRICULUM VITAE of Applicant(s) including References

Please attach curriculum vitae of each applicant including references.

#### **SUBMISSION INSTRUCTIONS**

Mail three copies of completed application and any attachments, organized into three individual sets, to:

NFDA 2007 FUNDING GRANTS PROGRAM National Funeral Directors Association 13625 Bishop's Drive Brookfield, WI 53005