

TABOR GRANT AWARD PROJECT REPORT 2026

APPLICANT NAME	<hr/>		
HOME ADDRESS	<hr/>		
CITY	STATE	ZIP CODE	<hr/>
PHONE	EMAIL <hr/>		
APPLICANT PARISH/ORGANIZATION <hr/>			
AFFILIATION/POSITION	MINISTRY <hr/>		

Project Title, Date, and Location

Other Participating Parishes/Schools/Organizations (if any)

1. Parish/School/Organization:

Pastor/Principal/Director:

2. Parish/School/Organization:

Pastor/Principal/Director:

1. Describe how this award has enabled your ongoing spiritual development and improved your ministry.
Was the outcome what you expected?

2. Review your original Budget Form and Budget Narrative. Describe how funds were used and any variance from the original projection.

Amount Requested \$ _____

Amount Granted \$ _____

Any Unused Funds \$ _____

3. Describe any unanticipated problems or concerns, if any, which you encountered during this project or the grant award process.

4. Any additional comments?

Please note that failure to submit this project report within 30 days after the conclusion of the initiative could result in a denial of future funding.

Please e-mail the completed Tabor Grant Project Report to jdisalvatore@catholiccommunity.org

Or mail to **The Catholic Community Foundation**
Attn: Jessica DiSalvatore, Tabor Grant Awards
Program 1404 E. Ninth Street, 8th Floor
Cleveland, OH 44114