

CHRIST THE KING PARISH ANNUAL STEWARDSHIP GIVING 2017

Dear Christ the King Parishioners,

As a major component of the Parish Stewardship Plan we annually share a portion of our Treasure, in the form of meaningful financial support, with worthy not-for-profit agencies or organizations.

Your participation in this process is welcome and essential because only agencies identified and nominated by Christ the King parishioners can be considered by the Parish Council to receive these funds.

1. In order to be considered, an agency or organization must meet ***all*** of the following criteria:
 - a. The goals and methods of the agency must be consistent with Christian principles
 - b. The agency should be responding to the clearly identified primary needs of the individuals such as food, clothing, shelter, education, health care and/or spiritual guidance.
 - c. The agency must be not-for-profit. (For-profit programs are not funded).
 - d. There must be a demonstrated management structure in place to administer and oversee the use of funds.
 - e. Only completed nomination forms will be accepted and reviewed for consideration.
2. Nominations may be for local, state, national or international organizations.
3. Additional consideration is given to those applications where matching funds, or a collaborative approach, will be used to address a specific need.
4. If the requested funding is for a specific project, please define the purpose and total cost of the proposed project.

If you have further questions regarding this process, please do not hesitate to contact Peter Smith: pnksmith@aol.com (Stewardship Committee Chairperson), Fr. Costanza: jaredjcostanza@gmail.com or any member of the Parish Council: parishcouncil@ctkri.org

Sincerely,
Jim Clarke
Parish Council President

**STEWARDSHIP SHARING PROGRAM
2017 NOMINATION FORM
Christ the King Parish
180 Old North Road
Kingston, Rhode Island 02881**

Please provide as much information as possible so the Parish Council can make an informed decision.

NOMINATED AGENCY OR ORGANIZATION

AGENCY OR ORGANIZATION NAME: _____

ADDRESS: _____

TELEPHONE: _____

CONTACT PERSON @ AGENCY: _____

GOAL/MISSION: _____

IF THIS IS A PROJECT PLEASE PROVIDE SOME INFORMATION ABOUT THE PROJECT AND THE TOTAL FUNDS TO BE RAISED.

RELIGIOUS AFFILIATION: _____

MANAGEMENT STRUCTURE: _____

WHY ARE YOU NOMINATING THIS AGENCY/ORGANIZATION? _____

YOUR NAME/PHONE: _____

Nomination criteria are provided on the back of this form.

DEADLINE for nominations is May 31, 2017. Please mail or deliver this form to the Parish Office.