

# Creditor Debtor Rights Section – Grant Program Application for 2024-2025

**Deadline**: Monday, December 2, 2024

A DDI I CATIONI INICODA ANTIONI				
APPLICATION INFORMATION  1. Agency/Organization				
Address				
City		State		Zip
Phone	Fax			
Email				
Board Chair/President				
2. 0. 1. 1. 0 0. 771				
2. Contact Person & Title				
Address				
City		State		Zip
Phone	Fax			
Email				
3. Type of application	New		Supplemental	Renewal
4. Program title				
5. Total amount requested				
6. Status of program within the	organiza	ition	New	Currently in operation

7. Program timeline for use of grant funds (start/end date)				
8. Geographic Scope of the program				
9. Organizational status of applicant				
Unit of local government.				
Tax-exempt IRS Code 501 C3 non-profit corporation. (Please provide copy of IRS certification letter with application.)				
Other (specify):				
10. Employer's Identification Number				
11. Certification				
I certify that the proposed program will be operated in compliance with the Americans with Disabilities Act. I further certify that not person shall on the grounds of race, sex, nationality, religion, or sexual orientation be excluded from participation in, be denied the benefits of, or be subjected to, discrimination under this project.				
Authorized representative check here to indicate assent.				
Date:				
Name & Title of authorized representative:				
Name				
Title				

# **B. PROJECT NARRATIVE** (please limit to two pages)

Describe the various aspect of the program, including, but not limited to:

- Program title.
- Period of operation using grant funds. Number of individuals to receive
- Mission statement.
- Program operation and management.
- Expected outcomes.

- Target population.
- Number of individuals to receive creditor-debtor legal services and/or support.

## C. WORK STATEMENT – GOALS, OBJECTIVES & TASKS

State the program goal(s), objective(s) for each goal, and tasks for each objective.

## Example

Goal: To increase access to legal services for pro bono bankruptcy clients.

Objective #1: Establish neighborhood clinic in West Park to review filing papers.

Tasks: To complete by December 31:

1) Locate and secure appropriate clinic location.

2) Organize and schedule volunteer staff.

3) Purchase supplies and materials, etc.

## D. EVALUATION PLAN

Describe the method of program evaluation, including evaluating the outcomes of stated goals and objectives.

*NB*: The WSBA Creditor Debtor Rights Section required a year-end program evaluation report that will be due in September 2025.

## E. BUDGET

Provide a brief statement regarding the need for outside financial support in order to operate the program. Please describe:

- Annual operational budget of agency/organization (or include copy of budget).
- Program budget, including percentage of budget using WSBA Creditor Debtor Rights Section grant funds.

#### F. APPLICATION SUBMITTAL

**Application Deadline – December 2, 2024** (must be received via email by this date.)

Please address cover letter to: Rebecca Sheppard, Grant Program Chair

WSBA Creditor Debtors Rights Section

Email application and cover letter to: rjs@rsheppardlaw.com