

Universal Grant Application

Suggested source(s) of requested funds: (Check appropriate box(es))

Brand Endowment Foundation Huebner Memorials

Sponsoring Church or other Organization: _____

Contact Person(s): _____
Name Title

Phone: _____ email: _____

Describe the proposed project/program/improvement: *(Please attach additional page if necessary)*

Describe the benefits to First Plymouth Church. If applying to the Foundation please include an assessment of benefit to the broader community or to the church.

Project Timeline:

Budget Summary: Please itemize expenses and income identifying other fundraising or in-kind support.

Amount of funding request: _____

Note: any funds remaining unspent after the purpose of the grant has been fulfilled will be returned to the appropriate fund unless otherwise specified.

Are you pursuing other sources of funds? Yes ___ No ___ If so, please describe.

I agree to acknowledge the source of this financial support and agree to present a program about the project.

Applicant's Signature

Date



NOTE: The governing committee or board will not be able to review requests for which the funding has already been planned, committed, etc. If you need a response faster than the regularly scheduled meeting, please contact the Chair to discuss an expedited request.

FOR COMMITTEE ACTION USE ONLY

Committee action: Approved
 Disapproved
 Other (specify)

Authorized signature

Date

April 2019