christ lincoln
FOUNDATION

Grant Application

APPLICANT INFORMATION

Organization
Address
City, State, Zip
Phone

Individual Contact

Email

AMOUNT AND TYPE OF SUPPORT REQUESTED

The dollar amount being requested: $

Total project budget: $

Date funds are needed:

PROPOSAL SUMMARY

Project name:

Please give a detailed description of the project request (attach description if necessary):

How does the project serve Christ and further His kingdom?

How does the project benefit Christ Lincoln?

Signature of Applicant: _____ Date: _____

For Foundation Use Only

_____Date Application Received
_____Application Denied
_____Date Reviewed —Director of Ministries
_____Application Granted

_____Date Application Considered —Committee
_____Amount of Grant
_____Date Application Considered —Board
_____Date Grant Payment Issued

Return Completed application form to address above: Gary Hamilton / CL Foundation Finance Committee or via email ghamilton1@windstream.net.