

Light of Christ Lutheran Church Endowment Fund

Grant Application Form

“Like good stewards of the manifold grace of God, serve one another with whatever gift each of you has received.”
- 1 Peter 4:10



APPLICANT CONTACT INFORMATION

Name: _____

Address: _____

Phone: _____ **Email:** _____

Signature: _____ **Date:** _____

GRANT REQUEST INFORMATION

Total Amount Requested: _____ **Project Location:** _____

Describe Your Project: _____

Describe the Need for This Project: _____

How will this Project further the Mission & Ministry of Light of Christ?

Who Will Be Involved in Completing This Project?

List Other Groups Collaborating with You to Complete This Project:

How Will Funds be Allocated? (capital expenses, personnel, equipment/supplies, promotion, transportation, etc.)

Project Start Date:

Planned Completion Date:

Project Time-line Narrative:

Who Would be Responsible for Completing a Project Summary Report if Application is Successful?

Name:

Phone:

Email:
