

**St. John's United Methodist Church Foundation
GRANT APPLICATION**

The Foundation maintains funds to support St. John's programs and missions. Four programs we will consider are listed. For which program(s) are you requesting funds? Please have Program Chair[s] sign below. Use backside of form if needed for any of the requested information.

_____ Program and Education Fund
_____ Property Fund

_____ Operations Fund
_____ Outreach Fund

1. Why is your project needed, what is the total cost, and who will do the work?

2. What other funding do you have or have obligated for this purpose?

3. What is the amount you are requesting from the Foundation? _____

4. Who will be responsible for overseeing expenditure of the grant money? (include contact information here and sign below*).

The Foundation Board members require a written report from this person within six (6) months of completion of the project. A report of the results of previous grants received from the Foundation must be on file with us prior to receiving any further grant money from the Foundation. Have you filed reports on all previous Foundation grants received? _____

Signatures:

*Person Responsible: _____ Date: _____

Concurrence of Committee Chair: _____ Date: _____
Print name:

Concurrence of Staff (one person): _____ Date: _____
Print name:

NOTE: A minimum of two *different* people must sign above.

FOR FOUNDATION USE

Amount requested \$ _____ Amount granted \$ _____

Prior reports received? _____ Date of notification _____

Board Comments: _____