

GRANT APPLICATION FORM

THE PRESBYTERIAN FOUNDATION OF COLUMBUS, INDIANA

Date: _____

Requestor: (FPC **Committee** requesting or endorsing grant) _____

Contact Person: _____

Phone: _____

Mailing Address: _____

City/Zip code: _____

Amount Requested: \$ _____

Total Cost of Project: \$ _____

Other Sources of Funding: _____

Amount: \$ _____

Grant Review Date: Spring/ _____
Year

Grant expires May 31 of following year

Fall/ _____
Year

Grant expires Nov 30 of following year

Description/Name of Grant: _____

How will the grant enhance and encourage the growth and outreach activities of the First Presbyterian Church of Columbus, IN? (please attach narrative)

Project Duration: (please provide details, especially if anticipated duration is greater than one year)

Who will benefit from the project: (please attach narrative)

Please attach to this request:

1. One page abstract describing your project, typed double spaced.
2. Project Budget
3. List of Committee or Board members overseeing this project.

The undersigned hereby certify that all information contained in and submitted with this proposal is correct, that this request is submitted with endorsement of a church committee, and that the expenditure does not represent an item appropriate in the Annual Church Budget, and that a Grant Progress Report will be completed and returned to the Foundation following completion of the effort for which the Grant was intended.

Signature of Requestor: _____ Signature of Committee Chair: _____

Session Review By: _____ Session Review Date _____

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Foundation Use Only:

Grant Request Review Date: _____

Grant Request Approved _____ /Denied _____

Grant Amount Approved: \$ _____ Comments: _____

Rev: 02.03.2015 jmf

2/14/2019