

# People In Need Grant

## APPLICATION FORM



### ABOUT THE APPLICANT

All of the information on this page pertains to the eligible organization that is applying for the grant and accepting responsibility for all funds received.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Web Address \_\_\_\_\_ Email \_\_\_\_\_

Annual Church Income \_\_\_\_\_ Number of Members \_\_\_\_\_

**NOTE: In order to receive a People In Need Grant, reports on previous People In Need grants must be filed with the Fund.**

### SIGNATURE OF AUTHORIZED PERSONS

Our signatures certify that the information above is accurate. Our signatures are made as persons who are authorized to do so on behalf of the applying organization

Clergy Name \_\_\_\_\_ Email \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Laity Name \_\_\_\_\_ Email \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

(Chair, Treasurer, Deacon, Ward, etc.)