

St. George Mission Fund Grant Application Form

How Do I Apply For A Grant?

A St. George Mission Fund (SGMF) Grant Application Form must be completed by a parishioner or parish organization in good standing. The Application Form may be obtained in the church office or by asking one of the Trustees. Grants may be requested for the religious, educational, cultural and fellowship missions of the church.

The Form is to be returned to the SGMF Board of Trustees by December 1 of each calendar year. The SGMF Board of Trustees will review each application and make a final decision regarding approval by the following February 1. Not all grant requests will be approved.

The SGMF Grant Application Form may be returned to the SGMF preferably by email sgmisf.bh@gmail.com, by US. mail at the church address (Attn: SGMF), or in person.

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|--------------------------------------------------------------------|
| Date of Application: |
| Organization or Parishioner Name: |
| Name of program/ministry for which this grant will be used: |
| Chairperson/Lead Organizer Name: |
| Email Address: |
| Best Phone Number: |
| Organization Board |
| President: |
| Vice-President: |
| Secretary: |
| Treasurer: |

What is the goal of this program, when and how will these funds be used?

(If necessary, please attach additional information important to your application)

BUDGET

Please attach a fully detailed budget for how these funds will be used.

Note: This budget must only include expenses for implementing this particular program. No other expenses are to be included. All funds provided by this grant that are not used for the stated purposes and within the specified time frame are to be returned to the St. George Mission Fund (SGMF) immediately.

Expenditures by Category (ex: supplies, fees, travel, meals, etc.)

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| Total: | |

AFFIRMATION

The parishioner, or the officers of the requesting organization, affirm with their signatures that all statements and documents associated with this Grant Application Form are true.

Name and Role

Signature

Date

| Name and Role | Signature | Date |
|----------------------|------------------|-------------|
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