 

**Partnership Commission Grant Application**

**TELL US ABOUT YOUR PROPOSAL**

**PROJECT TITLE** Click or tap here to enter text.

**NAME OF Applicant(s)** Click or tap here to enter text.

1. **Project Start and End dates** Click or tap here to enter text.
2. **Describe the project you would like to do in 200 words or less (on attached page)**
3. **Total proposed budget for project completion** Click or tap here to enter text.
4. **Amount of request from the Partnership Commission** Click or tap here to enter text.

**Please list anticipated financial and in-kind support from project partners below:**

|  |  |  |
| --- | --- | --- |
| **Churches/Groups/Organizations** | **Role in Project** | **Financial Contribution** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**CONTACT PERSON** Click or tap here to enter text.

**PHONE** Click or tap here to enter text.

**EMAIL** Click or tap here to enter text.

**WEBSITE (If applicable)** Click or tap here to enter text.

**Date of Session Approval** Click or tap here to enter text.

**PARTNERSHIP COMMISSION LIASON** Click or tap here to enter text.

**(to be assigned by Partnership Commission)**

**PHONE** Click or tap here to enter text.

**EMAIL** Click or tap here to enter text.

**2. Describe your project:**

Click or tap here to enter text.