 

 **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.