

GRANT APPLICATION
FOR REQUEST OF \$2,000 OR OVER
Christ Church
61 Main ST. Oyster Bay, NY 11771
fax- 516 922 0802

Name of Your Organization

Amount Requested

Are you affiliated with or part of the Episcopal Church/Anglican Communion? How?

Are you a subsidiary or part of a larger secular or religious organization? Which one?

What program or project would this grant fund?

Have you received prior grants from Christ Church? When and in what amount? How were these funds used?

What is the mission or purpose of your organization? Of this project?

What goals were you successful in achieving last year and what goals do you have for the coming year?

How will this grant be used towards achieving these goals?

Where else have you applied for grants in the last 12 months? Which grants have you received and in what amounts?

Where do you receive your long term financial support?

What is the personnel organization for this project or program? Please name key positions and current employee names and attach an org chart if possible.

Please submit a copy of your budget for the coming year and your latest financial statement. Copies of audited statements will be required for requests over \$15,000.

Other circumstances you want us to know when considering your request for funds.

Return this form before September 30 for next granting cycle

Name of person completing this application

Date

Position and title with respect to your organization