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## Project Application

Please fill out this application as completely and accurately as possible. Doing so will make a determination on your application much easier and faster. A ministry representative may visit you to gather additional information or to survey the project site.

Applicant Name; \_\_\_\_\_ Phone Number; \_\_\_\_\_

Referred By; \_\_\_\_\_ E-mail Address; \_\_\_\_\_ @ \_\_\_\_\_

Mailing Address; \_\_\_\_\_ Project Address; \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please give a brief description of the project; (please use a separate sheet if more room is necessary) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please give a brief explanation of your reason for requesting help from this ministry; \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Start Date Requested; \_\_\_\_\_ Project Completion Date Required; \_\_\_\_\_

Please check mark or fill in as applicable;

I will provide all materials for the project.

I will provide utilities as needed at the worksite.

I need help with the cost of materials.

I will provide meals for the work teams.

I will supply "Sweat Equity"

I will provide coffee, water, and beverages for the teams.

I will have \_\_\_\_\_ people to help.

I cannot provide any assistance to the project or teams.

This section to be completed by project evaluator

Evaluator Name; \_\_\_\_\_ Date of Evaluation; \_\_\_\_\_

Estimated Hours; \_\_\_\_\_ Estimated Cost; \_\_\_\_\_

Team Size Required; \_\_\_\_\_ Team Frequency; \_\_\_\_\_

Can This project be completed in the requested amount of time?  Yes  No

Is this project one that is reasonable for this ministry to undertake?  Yes  No

This section to be completed by the approval board

This project is;  Approved  Declined

Conditions of Approval, or Explanation of Decline; \_\_\_\_\_

Project Leader; \_\_\_\_\_ Project Name \_\_\_\_\_

Mail Completed Form To; Bridge Builders USA, 9437 State Road, Cranesville, PA 16140