

***ENDOWMENT FUND  
OF THE SAYVILLE CONGREGATIONAL UCC***

***APPLICATION FOR GRANT***

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INDIVIDUAL/GROUP APPLYING FOR GRANT

DATE: \_\_\_\_\_

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NAME & ADDRESS OF CONTACT PERSON

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PHONE # \_\_\_\_\_

AMOUNT APPLIED FOR \_\_\_\_\_ NEEDED BY \_\_\_\_\_

PLEASE STATE THE PURPOSE FOR WHICH YOU WILL BE USING THE GRANT  
(attach supporting documentation.)

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SIGNATURE OF APPLICANT/CONTACT \_\_\_\_\_

\_\_\_\_\_ DATE APPROVED/REJECTED BY ENDOWMENT FUND COMMITTEE

\_\_\_\_\_ DATE APPROVED/REJECTED BY CHURCH COUNCIL

\_\_\_\_\_ DATE CHECK PAID TO APPLICANT

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