

**ENDOWMENT FUND
OF THE SAYVILLE CONGREGATIONAL UCC**

APPLICATION FOR GRANT

INDIVIDUAL/GROUP APPLYING FOR GRANT

DATE: _____

NAME & ADDRESS OF CONTACT PERSON

PHONE # _____

AMOUNT APPLIED FOR _____ **NEEDED BY** _____

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

SIGNATURE OF APPLICANT/CONTACT _____

_____ **DATE APPROVED/REJECTED BY ENDOWMENT FUND COMMITTEE**

_____ **DATE APPROVED/REJECTED BY CHURCH COUNCIL**

_____ **DATE CHECK PAID TO APPLICANT**
