

FAITH EVANGELICAL LUTHERAN CHURCH
5414 East Lake Road
Erie, Pennsylvania 16511

The Rev. Jean Kuebler, Pastor

FAITH EVANGELICAL LUTHERAN CHURCH
ENDOWMENT FUND REQUEST FORM
[Application of Grant]

Name of Grant Recipient: _____ Date: _____

Address of Recipient: _____
[Street] [City] [Zip Code]

Grant _____ Date Needed: _____

Contact Person: _____

Amount of Fund Request: _____

Is the amount requested able to be partially funded? Yes, partial funding is OK
 No, the full amount must be funded

Description of project for which funds are requested:

[Continue on separate page if more room is needed.]

Anticipated results: _____

Grant requested by: _____ Phone #: (____) _____

Address of Recipient: _____
[Street] [City] [Zip Code]

Have funds been requested previously for grant request? Yes No

Does the grant recipient know of this request? Yes No

Name the Individual or Organization to whom the check is to be made payable:

Name: _____

Address: _____
[Street] [City] [Zip Code]

Signature of Applicant: _____

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This form is to be submitted to the Board of Trustees of the Endowment Fund Committee of Faith Evangelical Lutheran Church at:

Faith Evangelical Lutheran Church
Attn: Endowment Committee
5414 East Lake Road
Erie, PA 16511

Official Use Only

Action by Endowment Fund Trustees:	Action by Congregational Council:
Date Reviewed:	Date Reviewed:
Category: <input type="checkbox"/> Congregation Member Scholarships <input type="checkbox"/> Outreach into the community <input type="checkbox"/> Missions of the ELCA <input type="checkbox"/> Capital improvements of Faith ELC Erie	< Intentionally Blank >
<input type="checkbox"/> Approved <input type="checkbox"/> Rejected	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
If approved, Amount Awarded: Amount Requested:	< Intentionally Blank >
Comments:	Comments:
Board of Trustee's Secretary Signature & Date	Congregation Council Secretary's Signature & Date