

**Organization or Ministry Name**

**Date of Application**



Month Day Year

**Website**

**Address**

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

**Contact Name**

First Name

Last Name

**Email**

**Phone**

example@example.com

Area Code Phone Number

**Please describe your organization or ministry in a few sentences.**

## Funding Proposal

Grant Request \$                      What percent of the budget for this program would this grant support?

Please describe the program that this funding will support.

Is this a new program?

Yes

No, it is an existing program

Could this program involve an ongoing relationship with St. Anne's parishioners? If so, how?

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*You can return this form by email to [garrett@stanneslincoln.org](mailto:garrett@stanneslincoln.org).*