



**Missions and Outreach Committee
Grant Application Request**

Date:

Name of Requestor:

Are you requesting funds for yourself or someone else?

If for someone else, please provide their name and your relationship to the individual. Are you making this request anonymously?

Does this individual attend DNG?

Dollar Amount of Requested:

Can you provide a brief description of why the funds are needed?

Funds are payable to:

Mailing Address for Recipient:

Submission of an application does not guarantee the approval of the grant by Drawing Near to God. Drawing Near to God will review the application and notify the applicant of its decision following the Mission and Outreach Committee Meeting.

Received in Completion:

Approval:

_____ **Mission & Outreach Chairperson**

_____ **Representative of the Executive Board (if required)**

Office Use Only:

_____ **Amount of Check**

_____ **Check Number**

_____ **Date of Check**