

Endowment Fund Grant Request

GSLC Member Name		Date submitted
Contact email		Phone
Is this a new or existing ministry?	How much is request	Phone ed \$When needed?
Name of Ministry/Organization/Persor	n to receive funds	
Address of Ministry/Organization/Pers	on to receive funds	
Faith, Sharing God's Love" and "Guided that helps people make a difference in	d by God's Grace, and with our local communities, in	
Please tell us why this grant is being re	quested and how it furthe	rs GSCL's Mission and Vision statements.
The Committee would also like a writte supportive of your work and a summar		of your project detailing how the grant was nents compared to your initial vision.
Attach additional page(s), if you wish. Endowment Committee. Our goal is to		h office in a sealed envelope addressed to the r weeks.
Approved If ap	around data and shock are	mhor
Not approved If no		