

**GRACE EPISCOPAL CHURCH**  
**Grant Application Form**

Grant applications are accepted year round. Please complete form and send to:

Outreach Committee, Grace Episcopal Church, 4 Madison Ave, Madison, NJ 07940

Date of Application \_\_\_\_\_

Project name, if applicable \_\_\_\_\_

Legal name of organization to which grant would be paid

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Executive Director \_\_\_\_\_

Does your organization have non-profit status YES NO

If no, please explain \_\_\_\_\_

\_\_\_\_\_

Grant Request \$ \_\_\_\_\_ Check one { } General Support { } Project Support

Purpose of Grant \_\_\_\_\_

\_\_\_\_\_

Organization's budget for current year \$ \_\_\_\_\_

Total Budget of project, if seeking for a project \$ \_\_\_\_\_

To the Applicant:

Please feel free to attach any additional materials which you feel may be of value to the outreach Committee in considering your application for a grant.

Questions Feel free to contact the parish office at (973) 377-0106 or  
parishoffice@gracemadison.org.