

**Holy Trinity Episcopal Church  
Outreach Commission  
Grant Application Form**

Date of Request \_\_\_\_\_

Name of Organization \_\_\_\_\_

\_\_\_\_\_  
Mailing

Address \_\_\_\_\_

\_\_\_\_\_  
Telephone No. \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
Website Address \_\_\_\_\_

\_\_\_\_\_  
Name/title of Person Submitting Application \_\_\_\_\_

\_\_\_\_\_  
Requested Amount of Financial Support \$ \_\_\_\_\_

Please provide copies of:

1. Most recent year-end income statement and balance sheet
2. Current 501(c)(3) status letter
3. Names of current board of directors
4. Marketing literature or other program description brochures, flyers, etc.

In two pages or less, please provide answers to the following questions:

What is the purpose of your organization? What services are provided and how many people do you serve on an annual basis?

Are members of Holy Trinity Episcopal Church involved in your organization? If yes, please provide their names and how they are involved.

What new initiatives does your organization plan or what new challenges does it face?

Why is this grant needed and how will the grant money be used?

Is there any other information you feel would be helpful in our consideration of your application?

\_\_\_\_\_  
Signature of Person Submitting Application

\_\_\_\_\_  
We reserve the right to request additional information if necessary. We are unable to accept any electronic transmissions. Please mail the completed application and other materials by **October 1** to:

**Holy Trinity Episcopal Church  
Outreach Commission  
607 N. Greene Street  
Greensboro, NC 27401**

Rev. 8/15