SAINT ANDREW TITHE GRANT APPLICATION FORM

Name of Project:	
Requesting Amount (Maximum award \$5	,000)
Organization Name and Address:	
Website:	
Organization's Contact Person:	
Cell Phone:	Email:
Brief history of the organization and proje	ect goals.
Saint Andrew Project Sponsor:	
	Fmaile
Cell Phone:	Email:
Describe Organization's connections with	n Saint Andrew Parish.

Explain the intended use of the grant funds. Include overal	I project budget.
Describe the client population to be served by the Project.	
Prepared by:	Title:
Cell Phone:	Email:
	Date:
When completed submit electronically to info@saclemson.	<u>org</u>