

## Trinity Episcopal Parish Application for Outreach Grant Funds

| Organization/Project           |   |
|--------------------------------|---|
| Organization Contact           |   |
| Trinity sponsor (if available) |   |
| Address                        |   |
| Organization Telephone         | E-mail  |
| Sponsor Telephone              | E-mail  |
| -                              | nis project, including whether Trinity's parishioners will be will be used. Please be as complete and specific as possible  Date needed |
|                                | cial statement and/or annual reports, if applicable, with your nding from other sources please provide details in the                   |
|                                |   |

You will be notified of the date on which the Outreach Grants Committee will consider your request. An additional meeting with someone from your organization may be requested.

## **Submission Process:**

Submit your application with all supporting documents as one email attachment to the Outreach Committee Chairperson, Christie Crawford, <a href="mailto:christiec808@gmail.com">christiec808@gmail.com</a>. Use the subject line Outreach Grant. They will then be shared with Committee members. Please attach financial statements and any other supporting information as well.

If you are unable to submit your proposal or addendums electronically, please mail eight copies to:

Trinity Outreach Grants Committee
Trinity Episcopal Church
317 Franklin St.
Clarksville, TN 37040

Application Deadlines: Mailed/or emailed by 3 p.m. the end of each quarter.: March 31, June 30, September 30, and December 31.