

# BENEVOLENCE GRANT APPLICATION



Name: \_\_\_\_\_  
First Middle Initial Last Soc Sec #

Spouse: \_\_\_\_\_  
First Middle Initial Last

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Church: \_\_\_\_\_

Cell Ph: \_\_\_\_\_ E-mail: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Start Date: \_\_\_\_\_  
(month/year)

Start Date in the Missionary Church, North Central District: \_\_\_\_\_  
(month/year)

List Dependents:

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

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**This grant application is for an immediate crisis.**

1. Prepare and attach a 2-3 page narrative outlining the circumstances which created this need.
2. Attach a copy of your previous year Tax Form 1040.
3. Housing Allowance \$ \_\_\_\_\_
4. What sources of matching funds might you be able to develop for this grant (e.g. church, family, etc.)?
5. What is the amount of the grant you are requesting (up to \$2,400 per year)? \$ \_\_\_\_\_
6. What is the time period you are requesting?  1 year  2 years  3 years  4 years
7. Are you willing to receive financial counseling as a part of a grant award?  Yes  No  
(required to be considered for grant)



Print, complete, enclose the required documents and mail to:

**The Bridge Fund**  
**3301 Benham Avenue**  
**Elkhart, IN 46517**

- Application
- Narrative outlined in #1
- Tax Form 1040

**Criteria for Benevolent Grant includes the following:**

- ◆ Applicant has met continuing education requirements as outlined in the MCNCD Bylaws
- ◆ Applicant is currently active and participating in events of the MCNCD
- ◆ Applicant's urgency/emergency situations will be reviewed on an individual basis
- ◆ Grant maximum is \$2,400

**○ BENEVOLENCE GRANT:**

<input type="checkbox"/>	Recd on:	___/___/___
<input type="checkbox"/>	Board approval:	___/___/___
<input type="checkbox"/>	pending:	_____
<input type="checkbox"/>	mailed/e-mailed applicant:	___/___/___
<input type="checkbox"/>	Sent financial quest:	___/___/___
<input type="checkbox"/>	Recd financial quest:	___/___/___
<input type="checkbox"/>	<u>Sent to financial consult:</u>	___/___/___
<input type="checkbox"/>	<u>Financial consult recd:</u>	___/___/___
<input type="checkbox"/>	Sent Finan Info Req:	___/___/___
<input type="checkbox"/>	sent Sara check req:	___/___/___
<input type="checkbox"/>	check/letter sent:	___/___/___
<input type="checkbox"/>	closed:	___/___/___