

TRINITY UNITED METHODIST CHURCH
524 TUSCULUM BOULEVARD
FOR OFFICE USE ONLY:

DATE RECEIVED: _____ RECEIVED BY: _____

BUEL AND MILDRED BROOKS BEQUEST

Project Request Form for Programming for Children/Youth

Deadlines: (1.) April 30, (2.) August 31, (3.) December 31

Project Title: _____

Group/Person/Organization _____

Contact Person _____

Address _____

Phone Number _____

SPECIFIC Project Description of programming that money is being requested to fund and specific use of these funds for programming needs:

Amount of Request _____

Has this project received Brooks Bequest funds before? _____

If yes, last date of monies received _____

How much did you request? _____ How much did you receive? _____

Detailed Budget Information for this Project-only (include any matching or in-kind gifts to be received and all other funding sources – attach additional sheet if necessary)

Does this project need to be fully funded in order to be completed? _____

How many children/youth will be benefited from this project? _____

How will this project be sustained/continued upon the project completion?

If applicable, has this project been approved by the Church Council of Trinity UM Church? _____

If necessary, will you be willing to provide the Brooks Bequest Committee with additional information about your request? _____