

THE CHAPEL OF THE CROSS

Request for Donation

Date: _____

Name of Agency: _____

Address: _____

Executive Director: _____

This proposal contains a request for allocation from Chapel of the Cross in the amount of \$ _____

Has this request been approved by the Board of Directors of this organization? _____

Form completed by: _____

Title: _____

Phone: _____ Email Address: _____

How were you referred to Chapel of the Cross for funding consideration? _____

What other efforts are being made by your organization to obtain funding for this project? _____

In the space below, or on a separate sheet, describe the reason(s) for making this request. Include a description of the population served, the number of people served and how the money will be used (ex. What specific project will be funded). Please include a brochure, a financial statement and a copy of the annual report, if available.

This form must be completed and received in the church office in order to be considered for funding. If returning the form by mail please mail to:

Outreach Ministry Committee
Chapel of the Cross
304 East Franklin Street
Chapel Hill, NC 27517

Revised, August, 2011