

Ministries Of Christian Discipleship  
American Baptist Churches of Pennsylvania and Delaware

Grant Request Form

Date: \_\_\_\_\_

Group Submitting Request: \_\_\_\_\_

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

Amount Requested: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Telephone # and E-mail Address: \_\_\_\_\_

.....  
Please **TYPE** ALL Answers, Use back of page if necessary, include additional documentation if necessary. Please forward this request to your Area Minister.

Nature and purpose of the grant request:

Time Frame and Total Projected Cost:

Other Sources of Funding:

Evidences of long-range, cooperative planning:

In what ways is your church or organization involved in the support of American Baptist Missions?