



BESTOWERS FOUNDATION
6023 NW 107th Place
Alachua, FL 32615
<http://www.bestowers.org>
info@bestowers.org

APPLICATION FORM – GRANT FOR RELIGIOUS INSTITUTION

RELIGIOUS INSTITUTION INFORMATION			
Name:			
Registered State:		Registered Country:	
Address:			
City:		Zip:	
Phone:		Email:	
Website:			

GRANT AND PROJECT INFORMATION	
Requested Grant (USD):	
Purpose of the Grant:	

DETAILED PLAN OF THE PROJECT THAT GRANT WILL BE SPENT ON	

PROJECT DURATION			
Project Begin Date:		Project End Date:	
<input type="checkbox"/>	Upon receiving grant, I hereby agree to send pictures of the project, if applicable, to Bestowers Foundation via email at grant@bestowers.org wherein the pictures comprises a picture before commencing the project and a picture after completing the project.		

APPLICANT INFORMATION			
First Name:		Last Name:	
Title:			
Email:		Phone:	
<input type="checkbox"/>	I do hereby certify that above information is correct and true.		
Signature of the Applicant:		Date:	