

BESTOWERS FOUNDATION

Spend out of what Lord has provided for you seeking His pleasure alone

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NOMINATION FORM FOR "RAMADAN GRANT"

NOMINEE			
First Name:		Last Name:	
Address:			
City:		District:	
Country:		Phone:	
NOMINATOR			
First Name:		Last Name:	
Phone:		Email:	
QUESTIONAIRE & REFERENCES			
A. Please tell us few actions that the nominee performs which show that the nominee is conscious of Allah (swt).			
B. Provide one reference who knows the nominee and his family very well.			
1. Name:Phone:			
SIGNATUARE OF THE NOMINATOR			
☐ I do hereby certify that above information is correct and true and my nominee is unprivileged.			
<u>NOTE:</u> To sign this form electronically, please type your first name and last name within forward			
slash (e.g. /ABDUR RAHMAN/ , wherein ABDUR is first name and RAHMAN is last name)			
Signature:		Date:	