

Please list other funds, if any, available to support this project or program:

Source: _____ Amount _____

Source: _____ Amount _____

(attach a separate sheet if needed)

Time frame for this project or program:

Anticipated Start: _____: Anticipated Conclusion: _____

FOR SJGC USE ONLY:

Grant funded: Yes___ No___

Signature of Moderator of Social Justice Grant Committee:

Signature

Date

If funded, Amount of Grant _____

Date funds released _____

Schedule of Report(s) _____

Final Report Due _____