Appendix E – Endowment Grant Request



3239 E 70th St

Inver Grove Heights, MN 55076

Endowment Grant Request Form

Individual Making Request Name	Person/Group to Receive the Grant Name: Address
Address	City State Zip Contact Name
City State Zip Requester Email: Requester Phone	Contact Email Contact Phone Best time to contact:
Grant amount Requested: Amount: Date Needed	
Purpose/Need/Description of How Grant Funds will be used. 1) Aid to individuals or families whose basic necessities are threatened; 2) Missions 3) Educational assistance in the form of a grant 4) Other needs as determined by the Endowment Committee	
Endowment Committee Action:	Approved:
O Approved O Denied	Amount: Date:
Signatures:	
Chair of Endowment:	Witness, Endowment Member:
Special Considerations: For Endowment Committee use only	