

# Minor Grant application

To apply for a Minor grant from the Borgfeldt Legacy, submit this form together with supporting documentation, to the LCANZ Local Mission Office via email to localmissionl@lca.org.au

## Project/program details

|  |
| --- |
| Project/program proposal |
| Name of project/program |  |
| Date of application |  |
| Application details |
| Name of entity |  |
| Location*Town/suburb/area where the project/program is situated* |  |
| Core group*Key leaders and/or core persons making this application* |  |
| Sponsoring body, if applicablee.g. congregations supporting the project |  |
| Contact details |
| Name of contact person |  |
| Role |  |
| Address |  |
| Telephone |  |
| Email |  |
| Funding information |
| Total grant applied for | $ |
| Total funds received from other sources | $ |
| Own resources(estimated ‘in kind’ support) | $ |
| Commencement date |  |

## Supporting documentation

Check the boxes to indicate that the following requested supporting information is attached to the application

|  |
| --- |
| Attachments |
| *Refer to ‘Outline for Major Grant application’ in the Borgfeldt Legacy Grants booklet* |
| [ ]   | Executive summary of the proposal |
| [ ]  | Area of service |
| [ ]  | Organisational issues |
| [ ]  | Objectives and outcomes |
| [ ]  | Budget |
| [ ]  | Letter of support |
| Name and signature of author of application |  |

## Payment

|  |
| --- |
| Payment Details |
| Bank Account Holder Name |  | Name of Bank |  |
| Account Number |  | BSB |  |
| Name of person to receive payment notification |  |
| Email Address |  |