CORPUS CHRISTI FOUNDATION

#  Application for Grant Funding 2026

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| **Organization:** |  |
| **Name:** |  |
| **Address:** |  |
| **Phone:** |  |
| **Email:** |  |
|  |  |
| **Title of Proposed Project:** |  |
|  |  |
| **Total Cost of Project:**  | **$**  |
| **Amount of Request:**  | **$**  |
| **Dates of Proposed Project:**  |  |

**If you submit multiple applications, rank them by priority as 1st, 2nd, etc.:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of Project - please provide in detail; attach additional page if needed:**

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**Budget for Project - please attach itemized project budget and/or quotation(s):**

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**If the total cost of your project exceeds the amount of funds that may be granted, please identify your other source of funds. If your project is long-term, please identify long term funding source(s).**

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**Explain how your project benefits the participants:**

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**Please include signature of applicant and organization’s pastor(s) or principal, as applicable.**

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**Applicant’s Signature**  **Date**

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**Pastor or Principal Signature Pastor or Principal Signature (if joint project)**

**Due by 5:00pm on Friday, December 5, 2025 to: Karen Brown (kgbrown22@yahoo.com)**