

APPLICATION FOR SPECIAL PROJECTS FUNDS  
MISSION MINISTRY – UNION CHURCH OF HINSDALE

DATE: \_\_\_\_\_

CONTACT(S):

NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

DATE AND TIME OF PROJECT (ESTIMATED IF NOT KNOW): \_\_\_\_\_

FUNDS REQUESTED: \_\_\_\_\_

PROJECT DESCRIPTION (PLEASE INCLUDE TIME FRAME):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROJECT'S IMPACT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

UNION CHURCH ADULT MEMBERS THAT WILL BE INVOLVED (OR OUTLINE OF VOLUNTEERS NEEDED FOR PROJECT):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please fill out and return to the Minister for Christian Mission at the Union Church office. Any questions regarding this form can be answered by the Minister for Christian Mission at (630) 323.4303.*