

## **Good Shepherd Foundation Grant Application**

Grants made through the Good Shepherd Foundation should be supported by an active member of Good Shepherd Lutheran Church. This individual is herein referred to as the "Congregational Shepherd." The Congregational Shepherd should have knowledge of the proposed project and be able to ensure grants are used appropriately. Congregational Shepherds are permitted to apply for a maximum of two grants per calendar year.

In accordance with the operating policies of the Foundation, grant income is to be distributed within the following four areas. Please check the area that most fits the purpose of the applicant:

 Grants for outreach into the community including institutions and agencies with which Good Shepherd relates, and to special programs designed for those in our community who are in spiritual and/or economic need.
 Grants to institutions and agencies of the South Carolina Synod of the ELCA and for missions of the ELCA at home and abroad.
Grants to members of Good Shepherd Lutheran Church for the purpose of attending an ELCA seminary, for church related leadership conferences, or other such activities which enables members of the congregation to grow in Christian faith and service to God's people.
Grants for non-budgeted special projects of Good Shepherd Lutheran Church not normally funded by the congregation's annual budget.

## DEADLINE FOR RETURN OF GRANT APPLICATION IS MAY 1 AND NOVEMBER 1.

Please return the grant application to the Good Shepherd Lutheran Church office.

Good Shepherd Lutheran Church Attention: Foundation 3909 Forest Drive Columbia, SC 29204

	ollowing section should be completed by the Congregational Shepherd:				
Name					
Prefe	red Phone:				
Preferred Email:					
Are you an active member of Good Shepherd Lutheran Church? (circle one) Yes No					
Relati	onship with grant applicant?				
Are yo	ou directly involved with project for which grant funds are being requeste				
	ollowing section should be completed by the grant applicant: ization/individual Name:				
Conta	ct person (if different than above):				
	of contact person (if applicable):				
	::				
Email					
Mailir	ng address:				
Physic	cal address (if different):				
Tax ID	:				
Perso	n or Organization to make check payable to:				
	e provide a brief summary of the mission and goals of the applicant:				
	e provide the specific purpose for the anticipated grant funds, the amoun nt maximum amount \$3,000) and anticipated date funds are needed:	t applie	d for		

Additional information the Foundation Board may find useful in making its determination on the grant request: (for example, if grant does not cover entire cost of activity or project, what is expected total cost and anticipated alternate sources of financial support?)
By accepting this grant, I agree to provide a 250-word summary of the program the funds were used for and photos or print materials related to the program within 60 days of completion. Please email summary to the Good Shepherd Lutheran Church Parish Administrator (parishadmin@gslc.com).
Signature of Congregational Shepherd:  Date:
Signature of Applicant: Date:
For Foundation use:
Date received:  By whom:  Date of Foundation Board action:
Form revised 2024

OUR MISSION
We are a community of all ages gathered by God's grace in faith
for worship, learning, loving, and service to all.