



BESTOWER FOUNDATION®

Spend out of what Lord has provided for you seeking His pleasure alone

148 N Lakeside Drive, Kennesaw, GA 30144, USA

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APPLICATION FORM – GRANT FOR EDUCATIONAL / CHARITABLE INSTITUTION			
EDUCATIONAL / CHARITABLE INSTITUTION INFORMATION			
Name:			
Registered State:		Registered Country:	
Address:			
City:		Zip:	
Phone:		Email:	
Website:			
GRANT AND PROJECT INFORMATION			
Requested Grant (USD):			
Purpose of the Grant:			
DETAILED PLAN OF THE PROJECT THAT GRANT WILL BE SPENT ON			
PROJECT DURATION			
Project Begin Date:		Project End Date:	
<input type="checkbox"/>	Upon receiving grant, I hereby agree to send pictures of the project, if applicable, to Bestower Foundation via email at info@bestower.org wherein the pictures comprises a picture before commencing the project and a picture after completing the project. Further, I authorize Bestower Foundation to use our name and photo for purposes associated with fundraising and fulfilling foundation's goals.		
APPLICANT INFORMATION			
First Name:		Last Name:	
Title:			
Email:		Phone:	
<input type="checkbox"/>	I do hereby certify that above information is correct and true.		
Signature of the Applicant:		Date:	