



Application form for a program (Form B)

This form must be filled out, **signed** by the program coordinator, and then scanned as a PDF file. Send it using the SEND APPLICATION page on the website.

A. DATE OF APPLICATION:

B. IDENTIFICATION OF THE APPLICANT:

1. Name:

2. Address:

3. Telephone:

4. Email:

5. Role of the applicant in the program:

6. Applicant's signature: **X**

C. IDENTIFICATION OF THE ORGANIZATION OVERSEEING THE PROGRAM:

7. Name of the program for which funding is being requested:

8. Name of the organization overseeing the program:

9. Canada Revenue Agency registration number:

10. Name and title of the person responsible for the organization:

11. Address of the organization:

12. Telephone:

13. Email:

14. Website:

D. OVERVIEW OF THE PROGRAM OF THE APPLICANT

Describe your personal involvement with the program. What is your role? What drew you to it? How does it help spread the Gospel? Why do you think the Foundation should support it? The field allows a maximum of 500 words.