



Form for grant renewal (Form D)

In order to benefit from recurrent funding, a request must be made every year.

*All three parts of this form must be filled out, **signed** and then scanned as a PDF file.*

Please send it using the RENEW A GRANT page of the website.

A. DATES:

1. Renewal year: _____ 2. Year of first funding: _____

B. IDENTIFICATION OF THE APPLICANT:

1. First and last name, title of person authorized to sign: _____
2. Name of the organization: _____
3. Email address of the person: _____
4. Name of program (if applicable): _____

C. MINISTRY CHANGES:

Please check one box.

There were no changes in the past year to the ministry as stated in the original application for funding.

There were changes to the ministry in the past year. Explain:

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X _____
Signature

Date