



Vine Congregational
United Church of Christ Foundation

External Grant Application

For Organizations External to Vine Congregational UCC
(revised and Board approved 1/26/26)

Name of Organization _____ FTIN# _____

Organization Street Address _____ City, State, zip _____, _____

Phone _____ Email _____ Website _____

Contact Person Name _____ Title _____

Phone _____ Email _____

Applicant Organization Mission Statement/Purpose (attach or restate): _____

Amount requested _____ Specific purpose of application and description of
funds would be used: _____

Explain how applicant will evaluate the use of these funds toward their objectives _____

List other funding that will be involved in this project _____

Certification: The statements made are accurate and complete to the best of my knowledge. All sources
of funding available for this project are shown and will not be supplanted if this grant is awarded.

Signature of Applicant _____ Date _____

Signature of Organization's CEO, Chairman _____ Date _____