



Christ the King Lutheran Church

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Our Mission
To Shine the Light of
Jesus To Reflect His
Unconditional Love And
Mirror His Kindness to
All People



Grant#/Fund _____

Christ the King Mission Fund Grant Request

Organization/Ministry Requesting: _____

Date: _____

Contact Person: _____ Telephone: _____

Address: _____

City, State, Zip: _____

Type of Grant Requested

Seeding Evangelism Matching Outreach Emergency

Capital Improvement

Amount Requested: _____

Date(s) Funds Needed: _____

Number of Members Involved: _____

Projected Total Number of "Sweat" Hours: _____

Purpose of the Fund Request: _____

Signature: _____ Date: _____

Name(printed): _____

If the request cannot be granted at the upcoming CtK Mission Fund disbursement, would you like this request to be considered at the next disbursement session? yes no

Please attach a narrative addressing the questions on the back of this application

- 1) How will the funds be used? What is included in the request and what is not?
- 2) What other sources of funding are being used or requested for this project?
- 3) Have you received or applied for money from the Fund previously? If so, when and how much?
- 4) What are the goals?
- 5) What are the beginning and ending dates for this project?
- 6) How will the mission of CtK be advanced through this proposal?
- 7) How will CtK members and ministries be involved?
- 8) How will reporting be made to the Fund and entire congregation?
- 9) How will the results be measured and evaluated?