



St. Raphael
Educational Foundation

Grant Application

OPTIONS FOR SUBMITTING YOUR APPLICATION:

GIVE application to a SREF Board Member

EMAIL to edfororthodox@protonmail.com

Applicant Name or Organization _____

Contact Person _____

Address _____

Phone _____ Email _____

Home Parish _____

Priest and/or Spiritual Father _____

Project Description

(Please be detailed in your answers)

What will be done?

Who will directly benefit from the project? Describe educational and/or spiritual benefits.

How will you measure the success of your project?

Budget – please attach a budget including the total estimated cost of the project, the amount you will be requesting from the education foundation and any other contributors to the project (match funding).

Schedule – include project start date; include any key milestones and the estimated project completion date.

Signature

Date

***** OFFICE USE *****

Review Date _____ Fund _____ Fund with Conditions _____ Do Not Fund _____