

**Thank you for your interest in the
Elim Lutheran Church of Scandia Foundation.**

Please review the following requirements. If you would like to nominate a qualified organization, person or project, complete the attached gift nomination form..

All nominations must be received by October 1, 2020 to be eligible for consideration.

- To be qualified for a gift distribution, you must meet the Foundation mission of “Sharing the love of God in Jesus Christ through Christian outreach.”
- To be eligible for consideration, nominations must be received by October 1, 2018
- We provide grants worldwide. However, we require that a US based organization receive and disburse the funds.
- All fields, except those marked as optional, are required. Incomplete applications will be returned to the applicant and will only be re-considered if the completed form is received before the October 1 deadline.
- No specific activity or person will receive a distribution more than three years in a row without at least a one year break.

- Deliver or mail completed application to:

Elim Lutheran Church
Attn. Elim Foundation
PO Box 67
20971 Olinda Trail N.
Scandia, MN 55073

- Questions? Elim Lutheran Church Phone Number 651-433-2723

Grant distributions are awarded in January 2021

Elim Lutheran Foundation – 2018 Gift Nomination Form
“Sharing the Love of God in Jesus Christ through Christian Outreach”

Please Print or Type. Use additional pages if more space is desired

Date: _____

Name of Nominee _____

Nominator Name _____

What is the Mission of the **Grant Recipient?**

How does the Grant Recipient share the life of Jesus Christ through Christian outreach?

If the Grant Recipient receives a grant, how will the funds be used?

Information on the Grant Recipient

a. Address of the Recipient _____

b. Phone Number of the Recipient _____

c. Where are the recipients services provided?

b. Is this a parent organization or a local affiliate? If this is a local affiliate, please provide the name and address of the parent organization.

c. Does the Grant Recipient have a Website/ Facebook Page? If so please provide the links for these pages. Or, if available, please provide a brochure or other informational material about this group or project.

d. Please provide a list of key officers / positions for the recipient organization that will receive the funding.

Information on the Nominator

Phone Number _____

Email (Optional) _____

What is your involvement with the Grant Recipient?

Financial Information on the Grant Recipient

- a. Is this a 501 (c)(3) entity?
- b. What is its Annual Budget?
- c. What percent of its annual budget is spent on programs?
- d. What are the recipients main source of funding?

Gift Disbursement Details

- a. Gift Check should be made payable to (US Based Organization);
- b. Gift Check Should be Sent to (US Mailing Address);

Name _____

Address _____

City _____

State _____

Zip Code _____

Phone Number _____

Email (optional) _____