

**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, 2021 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, 2021
- 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 2022

Elim Lutheran Foundation – 2021 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 recipient's 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) _____