

# Application for a Make the Kingdom Great Again Grant



Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ EIN # \_\_\_\_\_

Website \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Organization's Mission:

1. Grant amount requested: \_\_\_\_\_
2. Name of the program for which a grant is requested: \_\_\_\_\_

3. Please provide a brief description of the program:

4. Is this a new initiative? (If yes, answer question 5. If not, skip to question 6.)  Yes  No

5. If this is a new initiative, when will the program be sustainable?

6. When will this program begin and at what point in time will you be able to evaluate its success?

7. Describe the need for the program, who will be served and how many unduplicated individuals will be served. Be as specific as possible in number and description. Example: 50 senior citizens in Nazareth.

8. Identify the measurable goals to be achieved by this program.

9. How will you know if you have succeeded? State measurable outcomes.

10. Do you receive funding from the United Way or other similar agency?

11. What other Lehigh Valley agencies offer services similar to yours?

**INSTRUCTIONS FOR SUBMISSION**

To electronically submit this application, save the application and then e-mail it to [grants@mkga.org](mailto:grants@mkga.org)

Please also attach to the e-mail **one** additional PDF file containing the following documents:

1. The organization's current budget.
2. The proposed itemized budget for the program for which funding is requested.

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Name of Authorized Person Submitting This Application:

Name \_\_\_\_\_ Title \_\_\_\_\_

E-Mail \_\_\_\_\_ Phone \_\_\_\_\_