



**Christian Church (Disciples Of Christ) Capital Area**  
**Request for Congregational Assistance Grant**  
**Commission for Congregational Life**

Date of Request: \_\_\_\_\_

Congregation to Receive Grant \_\_\_\_\_

Pastor / Senior Minister's Name \_\_\_\_\_

Church Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Requestor's Name \_\_\_\_\_

Project Name or Title \_\_\_\_\_

Brief Description of the Project (ex: upgrade fellowship hall, carpet in children's room, etc. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Cost \_\_\_\_\_

Equipment + \_\_\_\_\_

Supplies + \_\_\_\_\_

Labor + \_\_\_\_\_

Total Cost = \_\_\_\_\_

Congregation's Contribution - \_\_\_\_\_

Donations: Labor and/or Supplies. - \_\_\_\_\_

Other Contributions and/or Grants - \_\_\_\_\_

Grant Amount Requested: = \_\_\_\_\_

\*Please attach a copy of a professional proposal or estimate of charges and fees:

- If project is less than \$1,000 — please provide contractor projected estimate
- If project is over \$1,000 — please provide 2 contractor project estimates

Project Start Date \_\_\_\_\_

Project Completion Date \_\_\_\_\_

Provide a brief description of how this grant will enhance evangelism efforts in your ministry \_\_\_\_\_

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Board Chair Name \_\_\_\_\_

Signature and Date \_\_\_\_\_

Note: The Commission is authorized to allocate funds not exceeding \$1,000 to a single grantee; allocations in excess of \$1,000 require approval by the Board of Directors.

Christian Church (Disciples of Christ) Capital Area  
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