**Ministries of Christian Discipleship Fund**

American Baptist Churches of Pennsylvania

Grant Request Form

Date: Click here to enter text.

Group Submitting Request: Click here to enter text.

Address: Click here to enter text.

Amount Requested: Click here to enter text.

Contact Person: Click here to enter text.

Address: Click here to enter text.

Telephone #/E-mail Address: Click here to enter text.

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Please **TYPE** ALL Answers. Please forward this request to the Regional Pastor in your corridor

Nature and purpose of the grant request: Click here to enter text.

Time Frame and Projected Cost: Click here to enter text.

Other Sources of Funding: Click here to enter text.

Evidences of long-range, cooperative planning: Click here to enter text.

Does your church financially support **ABCOPAD’s Partners in Ministry Emphasis**? Click here to enter text.

Has your church submitted their **Cooperative Church Annual Report** for this year? Click here to enter text.