

Hurst Heritage Foundation - Grant Request Application

The Hurst Heritage Foundation makes grants to qualified nonprofit mission-minded organizations, ministries, and individuals serving the cause of Christ through a variety of ministries associated with First Baptist Hurst. Kingdom Impact will be the focus and priority for grants.

Please feel free to type your answers and use as much space as needed. If you write in your responses, and need additional space, indicate "CONTINUED" and attach a separate page to the application. Be sure to number your continued sections to correspond with the form.

SECTION 1 | APPLICANT INFORMATION (Please complete the following information):

Funding Cycle for Grant Request:

May Semi-Annual Funding

November Semi-Annual Funding

Emergency Funding

A: Name of Individual or Group Making Request	
B: Contact Person	
C: Contact Information (Address, Phone and E-Mail)	
D: Grant Amount Requested	
E: What percent of the total funding required will this grant cover? *	
F: Please describe why this grant is needed.	
G: If this is for emergency funding, please explain why the need was unanticipated and requires immediate funding: **	
H: When will the grant funds be used? What is the latest date that you need to know if all/part is granted?	
I: Has the Foundation awarded a grant to you/your group before? If yes, please provide details.	
J: If this grant is not received, will you still be able to accomplish your objectives? Explain.	

*Please note that grant awards will generally be made for no more than 50% of the total funding required.

** Please note the expectation is that the funds will be used within 12 months.

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SECTION 2 | MISSION/MINISTRY/PROJECT

A: Purpose of the mission, ministry, or project requiring funding.	
B: What have you done to meet this need? List current funding resources as well as other funding sources contacted and/or other efforts underway to solicit funds.	
C: Are you aware of any other funding resources not listed above? Provide details.	
D: How will the effectiveness of this mission/ministry/project be assessed?	
E: Additional information for the Foundation to consider.	
Date Submitted:	
Signature:	

In addition to the above, submit any supplemental materials that may be useful in helping the Foundation to evaluate this request. Please note that a grant accountability statement will be requested within 30 days of completion.

SECTION 3 | FOR FOUNDATION USE ONLY

Grant Status:

Approved for Funding (____%)

Additional Info Requested on date:

Denied for Funding (reason stated below)

Reason for Decision:	
Funding Amount and Date (with Check #):	
Accountability Statement Received:	
Additional Notes:	