

***In keeping with our mission***

of education and community service,  
the Nazareth Association has established  
a grant-funding program titled  
the "Special Needs Community Grant".

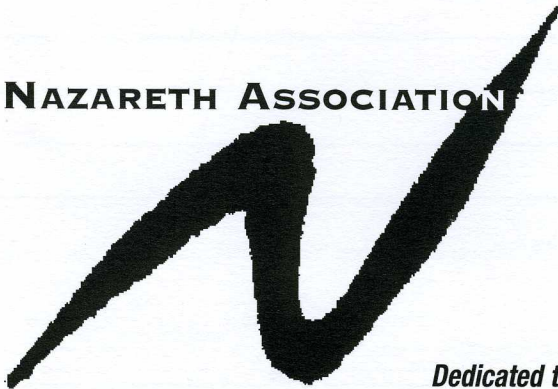
This program is in recognition of  
over a century of dedication and work  
so generously offered to communities  
throughout Michigan by the Sisters of St. Joseph,  
the founding order Barbour Hall,  
Nazareth Academy, Nazareth College,  
St. Camillus/Borgess School of Nursing, and  
St. Joseph/Flint School of Nursing.

The Nazareth Association was formed in 1992  
to perpetuate the legacy of these schools.  
This grant program is but one community service project  
sponsored by the Association.

It is designed to provide financial assistance  
for special needs of various ministries and facilities  
sponsored or endorsed by  
the Sisters of St. Joseph of Nazareth, Michigan.

Nazareth Association membership is offered to  
all students, faculty, staff, administrators,  
trustees, benefactors, and friends,  
of Barbour Hall,  
Nazareth Academy, Nazareth College,  
St. Camillus/Borgess School of Nursing,  
St. Joseph/Flint School of Nursing,  
and members of the Sisters of St. Joseph.

**NAZARETH ASSOCIATION**



***Dedicated to education and community service.***

**GRANT APPLICATION**

# Grant Application

Please type or print the application in ink.



1. Name of Organization \_\_\_\_\_

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

Telephone Number (    ) \_\_\_\_\_

2. Name of Applicant \_\_\_\_\_

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

3. Verification of employment status and/or affiliation with a SSJ sponsored ministry or facility (please attach).

4. Describe the project and its purpose \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Explain how this grant will assist you in meeting your goals \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Explain how the project will benefit the community \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Describe support received from other sponsors \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8. Attach a detailed budget.

9. Total \$ Amount requested \_\_\_\_\_

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

