

THE PRESBYTERY OF CAYUGA-SYRACUSE

APPLICATION FORM

BENEVOLENT CARE GRANT FUND

“The purpose of this fund shall be to provide benevolent grants to assist in the care of elderly persons within the bounds of Cayuga-Syracuse Presbytery.”

Criteria:

- 1) **Applications must be submitted by churches/sessions/boards or institutions. If an institution, a worshipping community within the Presbytery must indicate concurrence with the request.**
- 2) **A financial need must be demonstrated.**
- 3) **Grants will be awarded for benevolent care of elderly residing within the bounds of Cayuga-Syracuse Presbytery.**

Name of Applicant _____

Contact person _____

Address _____

Phone _____

Amount of Grant Requested \$_____

Please explain the **need** for this grant (use additional paper, if necessary):

Please indicate **how** this money will be used:

Who will benefit from this grant?

Where are the potential beneficiaries of this grant living?

If awarded, to whom should this grant be sent?

Name _____

Address _____

Phone _____

If applicant is an institution
Authorized Signature

Name of Church

Signature, Clerk of Session/Board

Date: _____

Applications must be received by November 1 each year.
Please send the completed Application Form to:

statedclerk@cayugasyracuse.org, or
Leadership Team
The Presbytery of Cayuga-Syracuse
5811 Heritage Landing Drive
E. Syracuse, New York 13057

(April 2015)
(address updated 2018)