



The Koinonia Foundation

PO Box 200

Wake Forest, NC 27588

www.SharingCommunity.org

The Koinonia Foundation Grant Application

Name of Organization: _____

Tax ID #: _____

Address (include both mailing and physical if applicable):

Name and Phone of Contact Person: _____

***If you need additional space to complete the following application questions, please feel free to attach a separate sheet(s). ***

Summary of your organization:

Please summarize what your organization does for the Greater Wake Forest Area.



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Summary of your project:

Briefly summarize the scope of your project. Please explain the need for this particular project and how it will advance the overall mission of your organization and its impact in the community.

Financial Resources:

A. Financials are required for the specific project which you are requesting funds. Please complete the separate Koinonia Foundation Financials form. Also, provide a copy of your yearly budget.

B. List below any other methods your group will be employing to increase your donor base.

Specific financial request:

Koinonia will need an exact dollar amount your group is requesting. Include the breakdown of how the funds will be spent.
