Lake Union ASI Funding Application

ORGANIZATION INFORMATION

1.	Name:		
2.	Address:		
	City:	State:	Zip:
3.	Email:		Website:
4.	Cell:	Business:	Fax:
5.	Date of Incorporation:		
6.	Administrative Officer:		
MEMBERSHIP			
1. Year Joining ASI:			

2. Why you Joined:

3. What is the extent of your involvement in the organization?

PROJECT BUDGET (Please list in detail below)

PROJECT INFORMATION

- 1. Project Start Date:
- 2. Expected Project Timeline:
- 3. Project Rationale:

4. **Project Description:**

- 5. If this special project requires more than ASI funding, how do you plan to raise it?
- 6. Describe the organization's vision, mission and background.

7. How does the community benefit from your organization?

8. What contribution is your ministry making for soul winning?

If this project is chosen to be funded, you agree to submit an interim and final report to ASI Lake Union on behalf of your ministry. The due dates of these reports will be made known to you if you receive word that your project has been selected.

Preferred method of submission is by email to communications.luasi@gmail.com. It can also be mailed to the following address.

ASI Lake Union 8450 M 139 PO Box 287 Berrien Springs, MI 49103

Signed:

Date: