

Sardis Presbyterian Church
Request for Financial Assistance

2025

Date of Application _____ (due December 15, 2024)

Name of Organization _____

Address _____

City, State _____ Zip _____

Contact Person _____

Telephone _____ Email _____

Amount of Assistance Requested \$ _____

Percentage of Annual Budget for Administration _____ %

Percentage of Annual Budget for Client Services _____ %

What is the overall mission of your organization? _____

Specifically, how will the requested financial assistance be used? _____

Do you currently have a volunteer or financial connection with Sardis Presbyterian Church? If so, please describe:

Specifically describe volunteer opportunities available for Sardis Presbyterian Church throughout 2025 to include when, where, and how often so Sardis can better engage volunteers in service, advocacy, and relationships.

*****Please include documentation of your tax-exempt status with this application.*****

Return completed application and supporting documents by email to missions@sardis.org by December 15, 2024.
Funding decisions will be made by March 15, 2025. Your organization will be notified of our decision after this date.