THE ORDER OF THE DAUGHTERS OF THE KING ®
SELF DENIAL FUND GRANT APPLICATION

Date___________________

Payee (Church or Organization) ____________________________________________

Amount Requested________________________________________________________

Mailing Address____________________________________________________________
____________________________________________________________
____________________________________________________________

Contact Person
Phone Number ____________________________________________________________
E-mail ________________________________________________________________

Beneficiary of grant ______________________
Is this person a Member of the Order? Yes_____ No____ Senior____ Junior____
Phone Number ____________________________________________________________
E-mail ________________________________________________________________

Tax ID Number (Organization-Form W-9 must be attached)(www.irs.gov)______________________________

Is this a NEW or CONTINUING grant? (Circle one)

Purpose of grant: In a short summary, fifty words or less – be specific, names and places
1. How the funds will be used?
2. Who will benefit from the funds?

Please write a more detailed explanation of:
3. How will this spread God’s Kingdom OR
4. How does this relate to your understanding of your Baptismal Covenant?
OR
5. If this is a PROJECT, answer #3 or how does this fit in The Great Commission.

Please attach the above information to the Application, if this is for an ORGANIZATION, literature related to the organization can be used.

National Council Contact Email: SelfDenialFund@doknational.org

Send Application to: Self Denial Fund Chair
The Order of the Daughters of the King
101 Weatherstone Drive, Suite 870
Woodstock, GA 30188

Please attach the above information to the application.