

Application for Self Denial Fund Grant



“Then he went about among the villages teaching. He called the twelve and began to send them out two by two...” Mark 6:6b-7a NRSV

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The Self Denial Fund supports missions in the U.S.A. and around the world. Self Denial Fund grants support missionaries and mission trips for both senior and Junior Daughters. Preference is given to members of The Order of the Daughters of the King®.

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Requirements

In addition to this form, Self Denial Fund grant applicants must submit all of the following as a single application packet:

1. On a separate sheet of paper, provide a short summary of the purpose of the grant identifying in 50 words or less how the grant monies will be used and who will benefit from the monies.
2. On a separate sheet of paper, provide a detailed explanation of
 - a. how this work will spread God’s kingdom, and
 - b. how it relates to the applicant’s understanding of their Baptismal Covenant OR, if a project, how it fits in the applicant’s understanding of The Great Commission.
3. A completed Payment Request Form. (Form can be found at www.doknational.org)
4. A completed IRS Form W-9, Request for Taxpayer Identification Number and Certification, is required for payment recipients (individual, church or business receiving the check or wire transfer) receiving grants over \$600. (Form can be found at www.irs.gov)

Guidelines

1. Mission work is considered to be work done outside of the applicant/beneficiary’s local area.
2. Self Denial Fund grant requests are accepted, reviewed, and paid throughout the year.
3. Requests for grants should be submitted no less than 8 weeks and no more than 6 months prior to the time of expected need.
4. Incomplete applications will not be accepted and considered until all required documentation is received by the Self Denial Fund Chair.

Beneficiary of the grant: _____

Contact Person: _____

(PROVIDE IF BENEFICIARY IS AN ORGANIZATION)

Is the beneficiary a member of The Order? Yes No

(IF BENEFICIARY IS AN ORGANIZATION, ANSWER FOR THE CONTACT PERSON)

If yes, Senior Junior Member # _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

Application for Self Denial Fund Grant Continued

Beneficiary of the grant: _____

Financial Information:

Amount of grant request: \$ _____

Expenses: PROVIDE TYPE AND AMOUNT

Financial Resources: PROVIDE TYPE AND AMOUNT

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

I pledge that the work funded by this grant will be used to make Christ known to others and spread God's love throughout the world. I certify that monies received as a result of this grant request are to be used for the purpose stated and any monies received in excess of the actual need will be returned to The Order of the Daughters of the King[®]. I further understand that I have an obligation to provide requested feedback to the Self Denial Fund Chair in the manner and time specified in the award notification letter and The Order has my permission to publish my name and/or photographs in publications and correspondence of The Order. Failure to provide feedback may impact the approval of future grant requests.

Applicant's Signature: _____ Date: _____

Submit completed form to The Order of the Daughters of the King[®], Attn: Self Denial Fund Chair via mail, fax, or email:
101 Weatherstone Dr Ste 870, Woodstock GA 30188 ♦ Fax: (770) 517-8066 ♦ Email: SelfDenialFund@doknational.org