

CSJ Ministry Support Fund

Large Grants

Supporting works of Compassion and Mercy

Grant Application – CSJ Endorsement Form

This form is to be completed by a Sister of St. Joseph, Associate or 'Ohana.

Date			Amount Requested \$
Last Name		_ First Nar	ne
E-mail Address		Phone _	
Address			
City		State	Zip
How many hours p	er week will you be invo	olved in this	s ministry?
In what capacity?			
Volunteer	Salaried staff member _	Во	oard Member
Executive Director			
E-mail Address		_ Phone _	
Address			
City		State	Zip
Proposed Project _			

Send your completed application and documentation by September 15 to: cbrong@csjla.org or Sister Carol Brong, CSJ
11999 Chalon Road, Los Angeles, CA 90049

213-924-2616

Only completed applications will be considered.