

**SAN FRANCISCO CHAPTER, AMERICAN GUILD OF ORGANISTS**  
**SPECIAL PROJECTS GRANT QUESTIONNAIRE - INDIVIDUAL**

Your name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Address \_\_\_\_\_

City State Zip code \_\_\_\_\_

Telephone: (        ) \_\_\_\_\_ E-mail or website: \_\_\_\_\_

Date(s) funds to be used: \_\_\_\_\_

Amount Requested : \_\_\_\_\_

Place(s) funds to be used \_\_\_\_\_

Simple statement of purpose for the project— (not a complete description of the project):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total budget of project showing all expenses and all sources of revenue including the amount you are requesting from us:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please include 3 references with your application.