

The Omaha Presbyterian Seminary Foundation
REQUEST FOR LIFELONG LEARNING PROGRAM GRANT PAYMENT

Due on or before November 15th.

Date: _____

Event / Program Title _____

Date(s) _____

Location(s) _____

Number of Participants Adults _____ Youth _____ Children _____

APPROVED GRANT (Grant pays up to 50% of expenses.) \$ _____

SUMMARY OF EVENT'S BUDGET

INCOME

Tuition / Fees Paid by Participants _____

Presbytery Contribution(s) _____

Other Income *(don't include CE Grant approved)* _____
(use extra pages as needed)

Income Total \$ _____

EXPENSE

Program / Speaker Fees _____

Food & Lodging / Travel _____

Miscellaneous Expenses _____
(use extra page as needed)

Expense Total \$ _____

Expense – Income = Balance or Grant \$ _____

Make check payable to _____
(Presbyterian organizations only.)

Mailing Address _____

Submitted by _____

Daytime Phone _____

Email _____

***Be sure a written evaluation of your event is attached.**

Revised .7.21.2015