

Christian Fund for the Disabled APPLICATION FORM

PLEASE READ	GUIDELINES BEFORE FILL	ING OUT APPLICATION		
Date:		Amount Requested:		
Name of Applicant:		Date of Birth:		
Address:				
City/State/Zip or Postal Code/Province:				
Country:				
Phone:	Fax:	E-mail:		
Federal Tax ID Number (for chur	ch and organization applicants or	nly):		
Endorsing Organization (This is required. Please see page 2 of the Guidelines.)				
Address:				
City/State/Zip or Postal Code/Pro	ovince:			
Country:				
Contact Name:				
Phone:	Fax:	E-mail:		
How did you hear about Christ	ian Fund for the Disabled?			
	organization, describe the miss			
What is your specific need?	z, family situation, nature of disab			
Explain what you are requesting	CFD funds for, and why.			

Christian Fund for the Disabled

$***PLEASE\ READ\ GUIDELINES\ BEFORE\ COMPLETING\ APPLICATION ***$

If you have received any financial assistance toward this need, or are expecting to, please state the		
source and the amount.		
What do you ultimately hope to accomplish if you are awarded funding?		
Describe how you would be affected as a result of receiving CFD funds. For scholarship applicants, how would this funding affect the disability community?		
(Optional) If you feel there are important aspects of your particular need that we have failed to ask you, please tell us here.		
Name of organization/sponsor that check should be made out to. (Note: This would typically be the		
endorsing organization. Money is not sent directly to individuals.)		

Christian Fund for the Disabled

Budget

When necessary, please provide a brief description or justification of line items. Budget should include only costs attributed directly to the specific need you are applying for. Be sure to include all necessary support documentation such as invoices, estimates, copy of conference or seminar application, etc.

Expense Item	Column A Amount	Column B	Column C	Column D
		Matching funds	Other funding	Total Budget
	requested from CFD	from sponsoring church or	sources	(add columns
	Irom CFD			A, B, and C)
T		organization		
Equipment/Materials				
Labor				
Assistive Technology				
Therapy/Specialized				
Treatment				
Supplies/Resources				
Seminars/Conferences				
Education:				
Tuition				
Room & Board				
Books				
Other (specify)				
Ministry or Missionary				
Training/Education				
Tuition				
Room & Board				
Materials				
Travel				
Other (specify)				
Other				
(please describe)				
TOTAL EXPENSE				*

^{*}This figure should reflect the total amount needed. For instance, if you plan to buy an accessible van for \$25,000, the total of Columns A, B, and C should be \$25,000. Please explain where the funds noted in Column C, if any, are coming from.



Joni and Friends Christian Fund for the Disabled

Hold Harmless Agreement

The Grantee of funds from the Christian Fund for the Disabled (CFD) hereby irrevocably and unconditionally agrees, to the fullest extent permitted by law, to defend, indemnify, and hold harmless Joni and Friends, their respective officers, directors, trustees, employees, and agents, from and against any and all claims, liabilities, losses, and expenses (including reasonable attorney's fees) directly, indirectly, wholly, or partially arising from or in connection with this grant, the application of funds furnished pursuant to such a grant, the program or project funded or financed by such grant, or in any way related to the subject of the use of the funds awarded. This paragraph shall survive the termination of this Agreement.

I certify that the information provided in the Application is true and correct and acknowledge that the Joni and Friends staff and Christian Fund for the Disabled Committee will rely upon this information in making its determination regarding the disposition of my request.

Signature of Applicant	Date	
Print Name		



Statement of Faith

- We believe the Bible to be the inspired, the only infallible, authoritative Word of God.
- ❖ We believe that there is one God, eternally existent in three Persons: Father, Son and Holy Spirit.
- ❖ We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracle, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory.
- We believe that God is love and the depth of his love was demonstrated by the life, death, and resurrection of Jesus Christ, and in the response we are called to compassionately love our neighbor.
- ❖ We believe that for the salvation of lost and sinful man, regeneration by the Holy Spirit is absolutely essential.
- * We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life.
- We believe our salvation and our eternal life is a gift of God's grace through faith alone in Jesus Christ and we are called to be a living testimony to others of that free and available grace.
- * We believe in the resurrection of both the saved and the lost; they that are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.
- ❖ We believe that the ministry of evangelism and discipleship is a responsibility of all followers of Jesus Christ.
- ❖ We believe in the spiritual unity of believers in our Lord Jesus Christ.

Print Name

- ❖ We believe that human life is sacred from conception to its natural end. We believe that since all life is sacred, every human being has value and deserves dignity. As such, we must have concern for the physical and spiritual needs of our fellow men.
- ❖ We believe God's plan for human sexuality is to be expressed only within the context of marriage, that God created man and woman as unique biological persons made to complement each other in marriage if God wills. God instituted monogamous marriage between male and female as the foundation of the family and the basic structure of human society. For this reason, we believe that marriage is exclusively the union of one genetic male and one genetic female.

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Signature	Date	
V		
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