

Project Recommendation

Description of suggested project: (Use another sheet if necessary) Date	
Explain the extent of need:	
Number of people this project would benefit: Is this a disaster or non-disaster pr	oject?
Submitted by:	
Name Address Local church involved: Has the recipient's statement of religious doctrine been obtained, evaluated, and is it a	Telephone Number
☐ Yes ☐ No ☐ Not Applicable Is there a potential for also spreading the gospel? ☐ Yes ☐ No Organizations involved: Estimate of resources required:	
1. Manpower: 2. Materials: 3. Equipment: Estimated funding requirements for the next 4 years: 1. Materials \$ 3. Other \$ 2. Equipment \$ Total \$	
Estimated duration of project:	
How would the project be closed or completed (if applicable):	
For a project with organizations as beneficiaries and expenditures over \$2,500.00,	
Have previous years financial statements or 990 form been obtained? ☐ Yes	☐ No
Volunteer recruiting method: ☐ Local ☐ Committee	
Project coordinator: Name: Address: Phone/Fax #:	
Proposed project discussed with local church Elder/ministry?	
☐ Yes, with on ☐ No)
Suggested project name:	
For Committee and Board Use	
Project proposal received: Acknowledged: Project number assigned: Project name: Reviewed by Board on Approved for presentation to the HarvestCall board: Yes, on Presented to the HarvestCall board on Approved: Yes Funding approved: \$ from Funds, over	□No