

Application Date:	Application Year
Applicant First Name:	Applicant Last Name:
Mailing Address:	Physical Address:
Email Address:	Phone (+ Int'l Code):
Website:	Facebook Page:
Are you presently affiliated with CSL as a:	Is your project connected with or sponsored by an existing
Minister?	CSL Community? If so, please provide
Practitioner?	Center Name:
Member? 🗆	Location:
Student?	Spiritual Leader:
Please provide the names and contact information of 2 persons who are familiar with your	
work. Name/Contact Info:	
Name/Contact Info:	
For which category are you applying?	
Seed money for new Centers for Spiritual Living communities outside the United States and Canada.	
 Expansion of existing Centers for Spiritual Living communities outside the United States and Canada. 	
 Projects, programs or events that extend the teaching of Science of Mind outside the United States 	
	uctors serving/supporting communities that are not able to
compensate their instructors.	
Project Vision:	
Project Mission:	
Project Purpose:	
Please provide the name and a brief, yet detailed, description of your project (see the guidelines for suggested	
content):	



What steps have you taken toward development/fulfillment of this project?	
Anything else you would like to have the Grant Committee consider in the review of this application:	



Budget Provide a brief narrative describing the proposed use of these moneys? This budget is to include: Anticipated total income including other sources of income and the amount requested from GS • Anticipated expenses • If this is a recurring project, please also include last year's financial statement Accountability for Grant moneys: You are to account to Global Services how you have put the Grant moneys to use. You are also to report the success of your project including lives impacted and other ways in which the project has served to expand Science of Mind in the world. Income Project generated income • Global Services Grant requested Other CSL Grants requested/received o Other Grants/Gifts anticipated/committed • Other (specify) **Total Income** Ś Expenses • Printing and materials • Purchase of Science of Mind related books Costs for creation of media (books, videos, audios) Signage and advertisements • Room or facility rental Administrative costs for providing classes or services o Costs related to holding classes or conferences Internet access Other online costs (Zoom, etc.) Facilitator expenses • Other (specify) **Total Expenses** Net Project Income/Loss (Income minus Expenses) Enter amount >>>> If your Grant Application is approved, disbursement details will be coordinated with Rev Martha Quintana (mquintana@csl.org) or 1+720-279-1636 On submission of this form I hereby declare that each and every statement and all information supplied by me in this application are true and correct to the best of my knowledge. At this time I consent to the storage of my data and grant the Global Services Committee permission to verify that I am in good standing with the Centers for Spiritual Living. Sign Here: