

## Cultural Preservation and Sharing Grant Application

Download the application, type information into the form, and save.

Last Name	First N	ame	Middle Initial
Mailing Address	City and	State	Zip Code
Home Telephone Number	Cell Phone Number	Email Address	-
Title of Proposed Project		SUA Branch and Locatio	n
Type of resources you are requesting		Member Number	
Use additional pages for the following Describe the project in detail. Please Project Title Purpose of project Members involved Timeline including dates, budget, etc.	include		
Plans for sharing. This must comply Necessary paperwork for 'resources		aring SUA information	
Signature of Grant Proposer		Date	
Signature of Proposers Branch President		Date	

Form Revision 1/2020

Send to: Email to:

Cultural Preservation and Sharing Grant Slovenian Union of America 431 N Chicago Street Joliet, IL 60432-1703

applications@slovenianunion.org or

bbkochmann@msn.com

Subject: Cultural Grant