

MULTI-FAITH AND SPIRITUALITY CENTRE

Grant for Religious and Spiritual Student Groups

APPLICATION FORM

Please note a breakdown of costs is also required

Name of Group:

CONTACT INFORMATION:

Name of Contact Person 1:

Student ID:

E-mail:

Phone:

Name of Contact Person 2:

Student ID:

E-mail:

Phone:

Name of Event:

Link to event:

Date(s):

Requested Amount:

(Max \$500)

Names and contact information
of group members planning to
attend:

Please explain how the
MFSC will be acknowledged for
the funding (advertising, special
thanks, etc.) and how this event
connects to the mission of the
MFSC . *(Using approx. 500
characters)*

Signature:

(Please note that typing your name in this field will be considered official.)

Please send completed form and budget breakdown to mfsc@concordia.ca