Applicant Church:				
Project Name:	Project Name:			
Church Pastor:				
Project Contact:				
This application addresses which (place an "X" or check under yes or no for each (place an "X" or check under yes	ch category)		est's mission directions?	
	Yes	No		
a. Leadership				
b. Church Transformation				
c. Connection				
2. Budget Summary			1	
Grant Request Amount	\$			
Other Funds	\$			
Total Project/Program Amount	\$			
3. Project Summary Please provide a brief summary of the project/program you are requesting funding for:				

As you fill in this grant request, you may find that some questions are more or less applicable to your proposed use of funds. This is understood by the prospective reviewers.

You are encouraged to complete the application to best of your abilities and critically consider the questions posed.

Ap	plicant Church:				
Pro	Project Name:				
4.	Project/Program Description Please describe the project in additional detail, including what steps or specific action will be included in the implementation of this project/program.				
5.	Church and Com Please describe how to community. Please ide				

Αp	plicant Church:						
Pro	ject Name:						
6. People Please describe the p that need.		ersonnel or team of individuals that your project/program will require and how you intend to meet					
7.		artnerships (i.e. community organizations, other churches, schools, non-profit groups, etc.) that will et/program. Please highlight any collaborations with other chruches in the region or your					

Ap	plicant Church:						
Pr	oject Name:						
8.	8. Project/Program Budget Estimate Operating Expenditures should include estimates for fuel, rental costs, third party contracts, memberships, or subscriptions. Capital Outlay costs should included estimates for onetime purchases including						
	technology, food stuffs, disposable items, etc.						
				Other	Other Funding Sources		
			Requested Grant Funds	Church Funds	Donations	Other Funds	Program Total
Pe	rsonnel Related	Costs Inc	luded in Req	uest			
To	tal Personnel Cost	ts					
Ор	erating Expendi	itures Inclu	uded in Requ	uest			
To	tal Operating Expe	enditures					
Capital Outlay Included in Request							
To	tal Capital Outlay						
Gr	and Total						
D	ercent of Total				·	·	·
7	ercent of Total						

Applicants are encouraged to fill out the budget in Excel. If that is not an option, please print this page, record your budget, and scan the completed document to include in your grant submission.

Ар	plicant Church:		
Pro	oject Name:		
9.	Short Term Objectives & Goals Please describe the short term objectives or goals that will be achieved through your proposed project/program.		
10.	10. Long Term Objectives & Goals Please Describe the long term objectives or goals that will be achieved through your proposed project/program.		