**GRANT APPLICATION**

Revolving Loan/Grant Fund

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ West Virginia UMC

**I. GENERAL INFORMATION**

Read each section carefully (some sections are for churches to complete and some are for mission projects, camps, etc. to complete). **Begin by completing Section A or Section B.**

**Section A: Church Application**

We, the undersigned, members of the Board of Trustees of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ United Methodist Church in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District of the West Virginia Conference of The United Methodist Church being duly authorized by the Charge/Church Conference, hereby apply for a grant in the amount of $\_\_\_\_\_\_\_\_\_\_\_ for the following project:

**Attachment A** *Please attach a description of the project and the need for the project*

*(Describe who will benefit from the project and the projected number of people who will be served)*

*Pictures are always helpful.*

**Section B: Camps, Mission Projects, or Parish Application**

We, the undersigned, members of the Board of Trustees of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District of the West Virginia Conference of The United Methodist Church, hereby apply for a grant in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the following project:

**Attachment A** *Please attach a description of the project and the need for the project*

*(Describe who will benefit from the project and the projected number of people who will be served)*

*Pictures are always helpful.*

Name of Pastor or Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church or Office Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church or Office Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Conference Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year church, mission project or camp was organized \_\_\_\_\_\_\_\_\_

**Church Statistics**

Current membership \_\_\_\_\_\_\_\_\_ Number of contributing families \_\_\_\_\_\_\_ Members 5 years ago \_\_\_\_\_\_\_\_\_\_\_\_\_

Average Worship attendance\_\_\_\_\_\_\_\_\_\_\_\_ Average worship attendance 5 years ago \_\_\_\_\_\_\_\_\_\_

World Service and Conference Apportionments-----*current year and past 2 years*

 \_\_\_\_\_ Current year $\_\_\_\_\_\_\_\_\_ Apportionment amt. $\_\_\_\_\_\_\_\_\_\_YTD paid \_\_\_\_\_\_ % paid

 \_\_\_\_\_ Year $ \_\_\_\_\_\_\_\_ Apportionment amt. $\_\_\_\_\_\_\_\_\_\_Amt. paid \_\_\_\_\_\_ % paid

 \_\_\_\_\_ Year $ \_\_\_\_\_\_\_\_ Apportionment amt. $\_\_\_\_\_\_\_\_\_\_Amt. paid \_\_\_\_\_\_ % paid

 It is very important that each church applying for a grant make every effort to pay its Fair Share amount in full. The failure of a

 church to pay its Fair Share may cause a proportional reduction in the grant or jeopardize the approval of the entire grant.

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**II. PROJECT FOR WHICH GRANT IS REQUESTED**

Are the funds needed because of a disaster? \_\_\_\_\_\_\_ If yes, describe the disastrous event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the total cost of the repairs because of this disaster? $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Estimated Cost of Project \_\_\_Actual Cost of Project………………..………………………….. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Check one)

**Funds to apply** to above cost:

 Cash on Hand ……………………………………………………… $ \_\_\_\_\_\_\_\_\_\_\_

 Pledges to be collected ………………………………………… $ \_\_\_\_\_\_\_\_\_\_\_

 Insurance Reimbursement ………………………………….. $ \_\_\_\_\_\_\_\_\_\_\_

 Loans from lending institutions ……………………………. $ \_\_\_\_\_\_\_\_\_\_\_

 Fund Raising to be completed ……………………………… $ \_\_\_\_\_\_\_\_\_\_\_

 Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ………….. $ \_\_\_\_\_\_\_\_\_\_\_

 **Total to Apply …………………… $ \_\_\_\_\_\_\_\_\_\_\_**

**Amount requested from Revolving Loan/Grant Fund** …………………………………………………………  **$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \***

 *\*Grant requests are not to exceed $12,500.00*

Expected date of completion for this project \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (month/year)

**Attachment B**: Attach an itemized list of expected expenses/costs for this project

**III. FINANCIAL INFORMATION OF THE CHURCH/CAMP/PROJECT/PARISH**

**Attachment C:** Attach a copy of the current budget for your church\*, camp, mission project, or parish---it must include all expected expenses for the current year, such as: salaries and benefits, utilities, conference apportionments, debt payments, supplies, maintenance, etc.

 \*NOTE: This is your entire church budget, not the budget for this capital improvement.

Total income for last year (offerings, gifts, interest, etc.) ……………………………………………….…. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total amount of money in reserve (Savings, CD, Trustee Funds, Foundations, etc.) …………. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property value (*as found in the conference journal*)

 Church Site ……….…. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 Mission projects, camps, etc. will also complete this section. Change the titles to match your property descriptions.

 Church Building ……. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 Parsonage……………. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 Other sites ……………. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 Other buildings ……. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debt $ \_\_\_\_\_\_\_\_\_\_\_\_

 TOTAL $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOTAL $ \_\_\_\_\_\_\_\_\_\_\_

**Attachment D:**

 Attach a copy of the deed(s) for all properties

**Attachment E:**

Attach an original document from your insurance agent,

 stating that there is sufficient coverage on this property

 and lists the amount of the coverage.

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**IV. SIGNATURES OF TRUSTEES**

(At least 2/3 of the members of the Board of Trustees or the entire executive committee of a mission project must sign)

At a meeting of the Board of Trustees or mission project executive committee held on the \_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, the foregoing application having been carefully prepared and read, and believing the project to be necessary, and pledging ourselves to earnest effort and liberal support of the undertaking, we request a grant in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Trustee or executive committee contact person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This person, along with the pastor or director, will be the person with whom the fund coordinator

of the Revolving Loan/Grant Fund maintains contact.)

List the names of all of the members of the Board of Trustees or executive committee of mission project (**Please Print)**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**V. CERTIFICATION BY PASTOR AND DISTRICT SUPERINTENDENT**

We hereby certify that we have examined and conferred about this application and are in agreement. Therefore, we recommend a grant be granted in the amount indicated below.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_

 Pastor or Director District Superintendent

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Recommended $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Recommended $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of conversation/consultation between the Pastor or Director and the District Superintendent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments if needed.

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**VI. CERTIFICATION BY DISTRICT BOARD OF CHURCH LOCATION AND BUILDING**

(Only need this certification if the project will cost 25% or more of the value of the property)

The meeting of the District Board of Church Location and Building, duly convened at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

on the \_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_. Future plans of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ United

Methodist Church, and the foregoing application for this grant, were carefully examined, and it is recommended that a grant of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ be granted.

 Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Chairperson

 Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Secretary

**VII. CLOSING PROCEDURES**

**Release of Funds:**

Funds, if available, will be released when all needed documents have been completed, approved, executed, and recorded.

**Authorization:**

We certify that we have read and understand the completed Revolving Loan/Grant Fund Application and the foregoing Policies and Procedures and will be governed by them:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Chairperson, Church Council Date Chairperson, Board of Trustees Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Chairperson, Committee on Finance Date Pastor Date

**Evaluation:**

Within 3 months after completion of the project, submit the enclosed evaluation form.

Return this application to: Gayle Lesure cburgparishgayle@yahoo.com

 PO Box 2043 304-848-0251

 Clarksburg, WV 26302

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Revolving Loan/Grant Fund Revised: February, 2013 Revised February 2017 WV Conference Global Ministries Revised: November, 2014 4/4