**All applicants should read the instructions carefully before completing the application. The downloadable application form and the instructions and guidelines are provided at**<https://www.presbyterianmission.org/who-we-are/financials/>**. Please type or print.**

**Complete the form below and send it as follows:**

 **Session - send proposal(s) to the Presbytery by May 1**

 **Presbytery - send recommended proposal(s) to the Synod by June 1**

 **Synod - send recommended proposal(s) to the Restricted Funds Oversight Subcommittee by July 1**

**Applicants will be notified of application status in October 2022.**

|  |
| --- |
| **1. To Be Completed by Requesting Council or General Assembly Entity** |
|  |
| Pin Number:  | E-mail Address: | Fund Number:  |
| Fund Restriction (see General Assembly Mission 2022 Unassigned Funds list):  |
| Grant amount requested (must equal or exceed $1,000): $ | Total Program/Project Budget (please complete budget worksheet): $ |
| If an application was made to other restricted funds for the same program/project, please list fund number(s): |
| Have you previously received a restricted fund grant?[ ]  Yes [ ]  No | If yes, which year did you receive the restricted fund grant?Year:  |
|  | For Committee Use Only─Amount Granted$ |

|  |  |  |
| --- | --- | --- |
| Applicant name and address (Council or General Assembly Entity): |  | Designated program/project contact person: |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name |  | Name |
|  |  |  |
| Address |  | Phone Number |
|  |  |  |
| City, State, and ZIP Code |  | E-mail Address |

If the applicant is a church (session), please provide the following information:

|  |
| --- |
| **2021** |

|  |  |  |  |
| --- | --- | --- | --- |
| Church Membership |  | Operating Budget | $ |
| Average Worship Attendance |  | Amounts Contributed to Presbytery, Synod, and GA (Excluding Per Capita) | $ |

Proposed Use:

The proposed use should be responsive to Evaluation Guidelines on page 5 of the grant application process instructions. If the proposed use is for church building/repair or a scholarship, **stop** [see Church Building Aid and Student Financial Aid Inquiries on page 7 of application instructions]. Approved applications receive a one-time grant distributed in a lump sum. Grants must be used within two years of distribution.

Proposed Use (continued):

1. Please provide a brief description of the program/project for which funding is requested below.

1. Is the program/project ongoing, or is it a new initiative? Please explain below.
2. Are funds being received from other sources to support this program/project? If so, what are the sources, and how much?
3. Background (more detailed description of program/project, and please show partnership with other mid councils)

**2. Budget for Project/Program (Revenue Should Equal Expense**

|  |  |  |  |
| --- | --- | --- | --- |
| Revenue Item | **Amount** | **Expense Item** | **Amount** |
| Total GAM Grant Funding Request |   | Planning |  |
| Individual Contribution(s) |  | Promotional Materials and Advertising |  |
| Presbytery Contribution(s) |  | Leadership Honoraria |  |
| Synod Contribution(s) |  | Leadership Travel/Housing/Meals |   |
| Other: (Describe each item over 10% of budget) |  | Other: (Describe each item over 10% of budget) |  |
| Tuition and Fees from Participants |  | Subsidies to Participants |  |
| **Total Project Revenue** |  | **Total Project Expense** |  |

**3. Comments**

Presbytery

|  |
| --- |
|  |

Synod

|  |
| --- |
|  |

# **4. Required Signatures**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Council** |  |  |  |  |  |  |
| Clerk of Session |  | Church |  | Signature |  | Date |

|  |  |  |
| --- | --- | --- |
| **Presbytery** |  | **Synod** |
|  |  |  |
| Presbytery Representative (*please type or print*) |  | Synod Representative *(please type or print*) |
|  |  |  |
| Presbytery |  | Synod |
|  |  |  |
| Address |  | Address |
|  |  |  |
| City, State, and ZIP Code |  | City, State, and ZIP Code |
|  |  |  |
| Signature | Date |  | Signature | Date |
|  |  |  |
| E-mail Address |  | E-mail Address |
|  |  |  |

#### **General Assembly Entity**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| Division Director (GA Only) |  |  |  | Signature | Date |
| Executive Director/President/Stated Clerk |  |  |  | Signature | Date |

**Restricted Funds Oversight Subcommittee**

Presbyterian Church (U.S.A.)

Restricted Funds Oversight Subcommittee

100 Witherspoon St., Room 6629

Louisville, KY 40202-1396