



**PRESBYTERIAN CHURCH (U.S.A.)  
APPLICATION FOR THE USE OF RESTRICTED FUND (2023)**

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 **ONLY**.

Complete the form below and send it as follows:

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

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

Synod - submit final application(s) to the Restricted Funds Oversight Subcommittee by **November 1**

Final applicants will be notified of application status in December 2023.

Contact Catherine Reuning for questions – [Catherine.Reuning@pcusa.org](mailto:Catherine.Reuning@pcusa.org) or (888) 728-7228 x5732.

**1. TO BE COMPLETED BY REQUESTING COUNCIL OR GENERAL ASSEMBLY ENTITY**

PIN	Applicant	Primary Contact E-mail Address
Fund Number	Fund Restriction (see General Assembly Mission 2023 Unassigned Funds list)	
\$	\$	\$
Grant amount requested (must equal or exceed \$1,000)	Total Program/Project Budget (please complete budget worksheet)	Amount Granted (For Committee Use ONLY)
Are you applying to other restricted funds for the same program/project? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list fund number(s)		
Have you previously received a restricted fund grant? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, which year(s) did you receive the restricted fund grant?		

<b><u>Applicant (Council or General Assembly Entity) Information</u></b>	<b><u>Designated program/project contact person</u></b>
Name	Name
Address	Phone Number
City, State, ZIP Code	E-mail Address

**If the applicant is a church (session), please provide the following Reported Statistics information for the calendar year:**

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 the 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.



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**Proposed Use (continued):**

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

**b. Is the program/project on-going, or is it a new initiative? Please explain below.**

**c. Are funds being received from other sources to support this program/project? If so, what are the sources, and how much?**

**d. Background (more detailed description of program/project, and please show partnership with other mid councils)**



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**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		\$
<b>Total Project Revenue</b>		\$	<b>Total Project Expense</b>		\$

**3. COMMENTS**

**Presbytery**

**Synod**



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**4. REQUIRED SIGNATURES**

**Councils**

<b>Clerk of Session</b>	<b>Church Name</b>	<b>Signature</b>	<b>Date</b>

**Presbytery**

<b>Presbytery Representative</b>	<b>Presbytery</b>	<b>E-mail Address</b>	<b>Phone</b>
<b>Address</b>	<b>City, State, ZIP Code</b>	<b>Signature</b>	<b>Date</b>

**Synod**

<b>Synod Representative</b>	<b>Synod</b>	<b>E-mail Address</b>	<b>Phone</b>
<b>Address</b>	<b>City, State, ZIP Code</b>	<b>Signature</b>	<b>Date</b>

**General Assembly Entity**

<b>Division Director (GA Only)</b>	<b>Signature</b>	<b>Date</b>
<b>Executive Director/President/Stated Clerk</b>	<b>Signature</b>	<b>Date</b>

**Synods and General Assembly Entities must submit completed applications to:**

Presbyterian Church (U.S.A.)  
 Restricted Funds Oversight Subcommittee  
 100 Witherspoon St., Room M007  
 Louisville, KY 40202-1396

-or-

[RFOS-PCUSA@pcusa.org](mailto:RFOS-PCUSA@pcusa.org)

**By November 1, 2023**