



Grant Application

Please indicate Mission Grant or Congregational Development Grant in the subject line of the email when you submit your application. (If you are uncertain which category it falls into, that's okay. We'll figure it out!)

You will receive an email confirming that your grant was received and when you can expect a decision to be made.

Unless submitting the application directly themselves, clergy-in charge will be asked to send an email confirming their support and understanding of the scope of work.

EMLI may request supportive documents, bids, and cost estimates for expenses in excess of \$1,000

Return the completed application to Sandra Senior, Director of Programs:
ssenior@dioceseli.org

Applications are reviewed quarterly and must be submitted by
March 15th, June 15th, September 15th, or December 15th.

As you fill out this PDF document, please ensure you are saving your work as you complete the application. This document will not automatically save. Thank you!

Submission Date	____/____/____
Grant Type	<input type="checkbox"/> Parish Mission <input type="checkbox"/> Congregational Development
Amount Requested	\$ _____
Name of Program	
Sponsoring Parish	Parish Name: Address: Website:
Clergy in Charge Contact Information	Name: Phone: Email:
Ministry Coordinator Contact Information	Name: Phone: Email:
Contact Information for other Ministry Coordinator (if applicable)	Name: Phone: Email:
Has your parish vestry & clergy reviewed & approved this request?	<input type="checkbox"/> Yes <input type="checkbox"/> No Date of Review:
Your current parish pledge/tithe for the Diocesan Ministry Plan:	\$ _____
Most recent Parochial Report:	____/____/____
Most recent Audit Certificate:	____/____/____



Program Information

Please provide an overview and describe your ministry:

What community need or congregational aspiration prompted your parish to begin this project or ministry?



Program Information

What do you intend to accomplish through this project or ministry?

How does this effort change or improve the lives of those being served?

Program Information (continued)

*List a minimum of 2 (two) main goals of your program and the corresponding objective for each goal.
Guidance: A goal is the anticipated outcome you hope to achieve. An objective is the specific action(s) that will help you achieve that goal. Objectives should include measurable actions where relevant. There can be multiple objectives for each goal.*

Goal	Objective
<i>Example: Develop a program to feed the homeless within our parish boundaries</i>	<i>Example: Provide 25 meals, twice per week</i>



Program Information (continued)

Please provide examples of other program activities that support your goals and objectives:

What, if any, barriers do you anticipate with this project or program? (Examples: risk of injury, bad publicity, lack of funding, low participation, difficulty recruiting volunteers, etc.)

What is your timeline for implementation once funding is received?

Program Information (continued)

List specific milestones and estimated dates for the year ahead:

Milestones	Approximate Date
<i>Example: Recruit at least 10 regular volunteers</i>	<i>Month/Year</i>

Program days and hours of operations (if applicable):	
Program start date	____/____/____
Program end date	____/____/____
Will you require paid staff to run this ministry?	<input type="checkbox"/> Full Time Number of hours/week <input type="checkbox"/> Part Time Number of hours/week
What is the scope of work for staff?	
Total number of volunteers that will be needed	
Will you recruit volunteers from the wider community?	
List specific tasks for volunteers (include skills needed):	



Budget Information

Download and complete [this budget template](#) to provide us with an overview of your expenses. You must submit this detailed budget along with this application in order for your grant application to be considered complete.

Annual ministry budget	\$
Amount requested from EMLI	\$
Amount supported by sponsoring parish	\$
Amount requested from other sources	\$

List sources of financial support from your parish and explain how it will be used.

List other sources of financial support and explain how it will be used.



Budget Information

Please describe any in-kind gifts (non-monetary) support that you will receive from internal or external sources that have an impact on your budget. (Consider the value of volunteer labor, value of food donated, value of donated supplies or materials. Also consider donated services from members of the congregation, fundraising or outreach efforts from members of the congregation, etc.)

Budget Narrative: Walk us through exactly what EMLI's financial support will be used for. List all the items in your budget and describe their purpose in achieving your stated goals and objectives. (Example: If you have a budget of \$5,000 for food, use this section to tell us "Every day at camp, the children have lunch. 20 campers have lunch 5 days a week for 5 weeks of the camp. We assume lunch will cost \$10 per child, per day.")



If you didn't have enough space to thoroughly answer a question in the grant application, use this space to elaborate. Please indicate clearly which question you are responding to.

A large, empty light blue rectangular area intended for providing additional information or elaboration on grant application questions.