



## Grant Application - Renewal

### *Filing Instructions:*

- Return the completed application to Sandra Senior, Director of Programs: [ssenior@dioceseli.org](mailto:ssenior@dioceseli.org)
- 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

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!**

|  |  |
|--|--|
| <b>Submission Date</b>   | ____/____/____   |
| <b>Amount Requested</b>  | \$ _____   |
| <b>Name of Program</b>   |  |
| <b>Sponsoring Parish</b>   | <b>Parish Name:</b><br><b>Address:</b><br><b>Website:</b>  |
| <b>Clergy in Charge<br/>Contact Information</b>                                      | <b>Name:</b><br><b>Phone:</b><br><b>Email:</b>   |
| <b>Ministry Coordinator<br/>Contact Information</b>                                  | <b>Name:</b><br><b>Phone:</b><br><b>Email:</b>   |
| <b>Contact Information for other<br/>Ministry Coordinator (if applicable)</b>        | <b>Name:</b><br><b>Phone:</b><br><b>Email:</b>   |
| <b>Has your parish vestry &amp; clergy<br/>reviewed &amp; approved this request?</b> | <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b><br><b>Date of Review:</b> |
| <b>Your current parish pledge/tithe<br/>for the Diocesan Ministry Plan:</b>          | \$ _____   |
| <b>Most recent Parochial Report:</b>   | ____/____/____   |
| <b>Most recent Audit Certificate:</b>  | ____/____/____   |
| <b>What days and times does your<br/>ministry operate?</b>                           |  |



## **Program Information**

**Please provide a description of your ministry:**

**What actions and activities have taken place toward achieving the goals identified in your initial grant proposal?**



## **Program Information (Continued)**

**What are some tangible or specific accomplishments of the program since funding was received?**

**What are some of your next steps to continue, to grow, or to sustain this program?**



## **Program Information (Continued)**

**Have you made connections with other local community partners, faith-based institutions, or individuals to sustain or enhance this ministry?**

**Please share (if possible) personal stories or accomplishments that speak to the impact of this ministry:**

**Have you encountered any unexpected challenges? Do you anticipate any particular hurdles going forward?**



## **Staff and Volunteer Information**

**How many volunteers are working on this ministry? Do members of the wider community volunteer? Do you need additional volunteers?**

**Are there ways that the parish acknowledges the efforts of the people involved in this ministry?**



## Service Information & Data

*Please complete the chart below with the data you collected in the past year, as it pertains to your ministry. If a data set is not relevant for your ministry, please leave it blank. In the space below, you can further elaborate data you've collected that does not fit into this chart.*

|   |  |
|---|--|
| <b># of participants (people served)</b>          |  |
| <b># of hours of training/ education provided</b> |  |
| <b># of volunteers</b>                            |  |
| <b># of volunteer hours</b>                       |  |
| <b># of community partners</b>                    |  |
| <b>lbs. of food/produce</b>                       |  |
| <b># of meals served/ distributed</b>             |  |

**Who is the target population being served by this ministry?**

**Please elaborate on any data you collected that is not included in the chart above.**



## 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.**

|  |           |
|--|-----------|
| <b>Annual ministry budget</b>                | <b>\$</b> |
| <b>Amount requested from EMLI</b>            | <b>\$</b> |
| <b>Amount supported by sponsoring parish</b> | <b>\$</b> |
| <b>Amount requested from other sources</b>   | <b>\$</b> |

**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 actual expenses or income are significantly different from what was budgeted, please explain.**

[Empty light blue rectangular box for explanation]

**If this current request for funding is significantly different from previous request, please explain.**

[Empty light blue rectangular box for explanation]

**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.**

[Large empty light blue rectangular box for elaboration]