

Church Vitality Grant Application

The purpose of the grant is to assist small churches in vitality and renewal.

Name of Church: _____	Date: _____
Address: _____	
Phone: _____	Fax: _____
Project Contact: _____	
Address: _____	
Phone: _____	E-mail: _____

This form will help you think through your project and envision how "success" will look. Most of your application will be in attached pages. Please number the pages clearly.

1. Provide a Brief Summary or your Project – include a description of the project/program, the amount of the request, the period the grant will cover, and proposed outcome.

2. Project Detail:

- a. Amount of request (maximum \$10,000 in aggregate) \$ _____
- b. Starting date: _____
- c. Length of project: _____
- d. Ending date: _____

3. Description of the Project:

- a. Need for the project /program.

- b. Goals and proposed outcome.

- c. Proposed activities to meet the goals.

- d. Proposed Outcomes of the Project. How success will be measured?

4. Project/Program Budget:

Please show the financial contribution of the congregation to this program \$ _____
Please attach any estimates with this application.

5. Sustainability

Please describe your plans to sustain the project/program beyond the grant period, if appropriate?

6. Evaluation

A Midterm and Final Evaluation will be submitted to the Transformation Committee using a form provided by the Transformation Committee. Please insert dates for the two evaluations and indicate the person designated to receive the forms.

Midterm Evaluation Date: _____

Final Evaluation Date: _____

Person: _____

Address: _____

CHURCH (SESSION REQUEST)

On _____, 20____, the Session of _____

Church of _____ (City/State), on behalf of the congregation, **VOTED** to apply for a Church Vitality Grant, subject to the approval of the Presbytery of the Cascades Congregational Support Committee.

Clerk of Session

Date

Submit to office@cascadespresbytery.org