



## THE VIRGINIA UNITED METHODIST GRANT APPLICATION

*(All Applications must be completed and turned in by October 31 at 5:00 pm)*

Foundation Grant     Micah 6:8/ No Harm Do Good Endowment Grant     Dr. and Mrs. William J and Francis Hanna Memorial Grant

(Visit [vaumfoundation.org/about-us/grants/](http://vaumfoundation.org/about-us/grants/) for guidelines on each available grant)

Name of Proposal/Ministry Requesting Grant: \_\_\_\_\_

Church Affiliation/Related Entity: \_\_\_\_\_

District: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Website: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### GRANT INFORMATION

Requested 2020 Grant Amount: \$\_\_\_\_\_ Total 2020 Funding Needed for Proposal: \$\_\_\_\_\_

1.) Will this one-time grant request enable the named proposal on the application to be completed?  Yes  No

a. If NO, what is the expected timeframe to complete the project? \_\_\_\_\_

2.) Have other funds for this grant proposal been requested?  Yes  No

a. If YES, from where?  Local Churches  District  Conference  Other

b. If YES, were funds awarded?  Yes  No

c. If YES, where were they awarded from?  Local Churches  District  Conference  Other

d. If NO, what was the reason(s) why the funds were not awarded?

\_\_\_\_\_  
\_\_\_\_\_

e. If YES, are funds from The Foundation grant necessary for the proposal to proceed?  Yes  No

f. If YES, please explain:

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3.) Has your organization previously received a grant from the Foundation?  Yes  No

a. If YES, how much were you awarded? \$ \_\_\_\_\_

b. If YES, did you complete the requested follow-up from the previous award?  Yes  No

4.) Briefly describe the purpose of the grant proposal. What issues will it resolve?

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5.) Briefly explain who is served by this proposal/ministry.

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6.) Does this proposal impact or relate to multiple local churches across the district or the conference?

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7.) In addition to answering the above questions, please attach the following summary materials to your application:

- a. Mission and/or vision statement.
- b. A detailed ministry plan (implementation plan) - strategies, methodologies, etc
- c. Projected 2019 Budget and timeline to include all sources of funding
- d. If applying for the *Micah 6:8 Grant*, please explain how these funds will help acts of justice, mercy and kindness.

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**District Superintendent Approval:** My signature indicates my approval of the named proposal. *(DS Signature is optional for Micah grant applicants.)*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This application must be signed by the District Superintendent for Foundation and Hannah grant applicants in order to be complete.***

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**I have read the guideline for each grant offered by the Virginia United Methodist Foundation. I affirm that this application meets the criteria for the selected grant and the information submitted is true to the best of my knowledge. If selected, I agree to provide at least a 250-word status report (with photos) to the Foundation within six months of funds being awarded.**

Printed Name of Submitter: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Send completed application with required signatures and summary materials via email ([foundationgrants@vaumc.org](mailto:foundationgrants@vaumc.org)) or mail no later than October 31, 2019.***