

10330 Staples Mill Road Glen Allen, VA 23060 Vaumfoundation.org

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804-521-1121

## THE VIRGINIA UNITED METHODIST GRANT APPLICATION

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

| ·   | dowment Grant Dr. and Mrs. William J  |              | morial Grant    |  |  |  |
|---|---------------------------------------|--------------|-----------------|--|--|--|
| (Visit vaumfoundation.org/about-us/grants/ for guidelines on each available grant)  Name of Proposal/Ministry Requesting Grant: |                                       |              |                 |  |  |  |
| Church Affiliation/Related Entity:  |                                       |              |                 |  |  |  |
|   |                                       |              |                 |  |  |  |
| District:   |                                       |              |                 |  |  |  |
| Contact Name:   |                                       |              |                 |  |  |  |
| Address:  |                                       |              |                 |  |  |  |
| City:   | State:                                | Zip:         |                 |  |  |  |
| Website: Phone:   |                                       |              |                 |  |  |  |
| Email:  |                                       |              |                 |  |  |  |
|   |                                       |              |                 |  |  |  |
| GRAN  | IT INFORMATION                        |              |                 |  |  |  |
| Requested 2021 Grant Amount: \$   | Total 2021 Funding Needed for P       | roposal: \$  |                 |  |  |  |
| 1.) Will this one-time grant request enable the name  | ed proposal                           | Yes          | ☐ No            |  |  |  |
| on the application to be completed?   |                                       |              |                 |  |  |  |
| a. If NO, what is the expected timeframe to c   | complete the project?                 |              |                 |  |  |  |
| 2.) Have other funds for this grant proposal been re  | quested?                              | Yes          | ☐ No            |  |  |  |
| a. If YES, from where?  | ☐ Local Churches ☐ District           | ☐ Conference | $\square$ 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 fund   | ds were not awarded?                  |              |                 |  |  |  |
|   |                                       |              |                 |  |  |  |
|   |                                       |              |                 |  |  |  |
| e. If YES, are funds from The Foundation gran   | nt necessary for the proposal to proc | eed?         | □ No            |  |  |  |

|     | Т.    | Tryes, please explain:   |                      |          |
|-----|-------|--|----------------------|----------|
| 3.) | a.    | our organization previously received a grant from the Foundation?  If YES, how much were you awarded?  If YES, did you complete the requested follow-up from the previous award? | ☐ Yes<br>\$<br>☐ Yes | □ No     |
| 4.) |       | ly describe the purpose of the grant proposal. What issues will it resolve?  |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
| 5.) | Brief | y explain who is served by this proposal/ministry.   |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
| 6.) | Does  | this proposal impact or relate to multiple local churches across the district or the co  | onference?           |          |
|     |       |  |                      |          |
|     |       |  |                      |          |
| 7.) | In ad | dition to answering the above questions, please attach the following summary mater   | ials to your appl    | ication: |
|     | a.    | Mission and/or vision statement.   |                      |          |
|     | b.    | A detailed ministry plan (implementation plan) - strategies, methodologies, etc  |                      |          |
|     | C.    | Projected 2021 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.

| <b>District Superintendent Approval:</b> My signature indicates my approval of the named proposal. (DS Signature is not required for Micah grant applicants.) |   |  |  |  |
|---|---|--|--|--|
| Printed Name:   |   |  |  |  |
| Signature:  | Date:   |  |  |  |
| • • •   | Superintendent for Foundation and Hannah grant applicants ler to be complete.   |  |  |  |
| this application meets the criteria for the selecte   | by the Virginia United Methodist Foundation. I affirm that ed grant and the information submitted is true to the best of least a 250-word status report (with photos) to the arded. |  |  |  |
| Printed Name of Submitter:  |   |  |  |  |
| Signature:  | Date:   |  |  |  |

Send completed application with required signatures and summary materials via email (<a href="mailto:foundationgrants@vaumc.org">foundationgrants@vaumc.org</a>) or mail no later than October 30, 2020.