BETHANY LUTHERAN CHURCH MISSION DEVELOPMENT FUND Grant Application For Ministries Outside Bethany Lutheran Church Application Filing Deadline is April 15, 2024

Name of Organization:		_
Grant type: (Check One) Community ELCA Met	tropolitan Chicago Synod ELCA Church-Wide	
Contact Person:	Phone/E-Mail:	
Organization Address:		
Date of Application:	_ Amount of Request:	
Time frame for which funding is being requested:	through	

This grant is designed to improve the lives of people. Emphasis is given to supporting ministry to and within special populations with unmet needs. Please return **one copy** of this form and **one copy** of all supporting materials to the church office.

- 1. Please describe the specific program, activity, or need for which this grant is to be used. Is this a new program? If this is an on-going program, provide historical background and results.
- 2. What specific outcome will occur as a result of this grant?
- 3. How will you evaluate whether the program has been a success?
- 4. Who will oversee and work on the program? What are their qualifications?

5. Please describe your organization, its history, purpose, and mission.

6.	Please attach one copy of :	your current budget
		your most recent financial statements
		your most recent audit or financial review

7. Please check any that apply:

 Our organization is registered with the State of Illinois as a	
charitable/not-for-profit organization.	
We have obtained 501-c-3 status from the IRS (EIN).
 We have obtained 501-c-6 status from the IRS (EIN).
 Our organization is listed on <i>Guidestar</i> .	

8. Please attach one copy of any additional comments:

My signature indicates that I understand and agree to the following:

By my signature, I agree that our organization assumes full liability for the program being funded through this grant. We hold as harmless all officers, employees and members of Bethany Lutheran Church and the Mission Development Fund. In addition, I have the authority to sign and speak for the organization listed. I have represented fairly information about the program for which I am seeking funding and our organization's ability to implement the program outlined. I further agree that if the program outlined is not completed within the time frame and specifications outlined, our organization will return on request grant monies distributed to us.

Signature and title of applicant

Applicant name, please print

Please note: Grant applications made without the inclusion of this information will <u>NOT</u> be considered. If there is some reason you cannot supply this data, please contact the grant chairman before submitting the application.