

**North Carolina Annual Conference of The United Methodist Church
Commission on Evangelism
Grant Application Form**

Who Are You?

Name of Sponsoring Group: _____

Address: _____

Email Address: _____
Office or Home Phone: _____
Cell Phone: _____
Church: _____
Pastor: _____
Church Address: _____

Phone: _____
District: _____
Church Size: _____

Event Information

Date: _____
Time: _____
Place: _____
Participating Districts: _____
Expected Number of Participants: _____
Capacity of the Facility/Function: _____
Is This a First or Repeat Event: _____

Guidelines

1. Please read and complete all information asked for on this application.
2. Please submit your application at least 90 days prior to the event to receive consideration by the committee.
3. A submitted application does not guarantee approval of the funding.
4. All applications are reviewed on a case by case basis and subject to availability of funding by the committee.
5. We encourage multi-district events as we are a connectional ministry.
6. Disbursement will be made to the sponsoring district office.
7. Because we have covenantal accountability to the conference for these grants, please submit a report of how your goals were accomplished within 60 days of the event. This can be sent to the chair, Rev. Carol Dean at cdean04@aol.com .

Submitted By:

Sponsoring Pastor/Leader's Signature

District Superintendent Signature

Please Include the Following Information:

1. Description of the Event
2. Theme of the Event
3. Tentative Speakers/Leaders
4. Preliminary Budget
5. Amount of Funding Requested
6. Goals for the Outcome
7. Expected Results
8. Measurements of Goals Achieved