

# PROGRAM GRANTS

Witness Ministry Team  
Holston Conference, The United Methodist Church

For United Methodist Churches and ministries of the Holston Conference

## Guidelines

1. Program grants are not for construction, renovation of buildings, or capital expenditures, such as vehicles or AV equipment; they are for program support only. ***These are one-time-only grants to be used as seed money to begin new program ministries that engage your church in sharing Jesus with the community.***
2. Under extraordinary circumstances, a ministry *may* be considered for a Program Grant for a second year. A new application must be made for the second year. No assumption should be made about automatic approval. Each project will be in competition with other ministries for funding.
3. The *minimum* Program Grant is \$2,500. Projects requiring less than \$2,500 should be able to secure district or local church funding. The *maximum* Program Grant is \$10,000.
4. No Program Grant will be made where the Witness Ministry Team funds constitute more than 2/3 of the total program cost.
5. **Priority consideration will be given to new ministries which show a potential for growth in the local church's membership and/or ministry to the community.**
6. Priority consideration will be given to new ministries which are projected following a church consultation or similar self-study.
7. Application deadline is September 15 each year.
8. **All applications must be filed on the approved Program Grant Application Form with all required signatures.**
9. All Application Forms should be requested from and returned to the Office of Connectional Ministries, P.O. Box 850, Alcoa, TN 37701-0850.
10. You are asked to provide Witness Ministry Team with a summary of the ministry and how it is progressing. The evaluation form will be mailed to you and is due to the Conference Office by September 1 of the year following the calendar year in which the grant is awarded.

**PROGRAM GRANT APPLICATION**

\_\_\_\_\_ Date

Witness Ministry Team  
Holston Conference

1. Name of Church \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

2. Pastor \_\_\_\_\_

Address \_\_\_\_\_

District \_\_\_\_\_ Superintendent \_\_\_\_\_

3. Officer of Church \_\_\_\_\_ Role \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

4. What is the ultimate goal of this proposed ministry? How will it contribute to growth in your membership and/or ministry? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. What program does the church plan to do through this ministry? (Describe the ministry) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **Church Profile** (Last calendar year)

Total Membership \_\_\_\_\_ Average Attendance Worship \_\_\_\_\_

Average Attendance Sunday School \_\_\_\_\_ Total Church Budget \_\_\_\_\_

Fair Share % Paid \_\_\_\_\_ Church Debt \_\_\_\_\_

7. **Financial Profile of New Ministry** for which funds are requested

Projected Budget for New Ministry (Attach a copy of budget.) \_\_\_\_\_ (total)

Cash on Hand for New Ministry \_\_\_\_\_

Other Grants \_\_\_\_\_

Other Income \_\_\_\_\_

Grant Requested \_\_\_\_\_

(Minimum \$2,500; Maximum \$10,000)

Financial Plan to sustain this ministry beyond this grant \_\_\_\_\_

8. What group(s) in your church has/have approved the project?  
\_\_\_\_ Church Council/Board  
\_\_\_\_ Finance Committee  
\_\_\_\_ Work Area on \_\_\_\_\_  
\_\_\_\_ Other? \_\_\_\_\_
9. Is this projected program or ministry the result of a church consultation or similar self-study?  
\_\_\_\_ Yes \_\_\_\_ No Explain: \_\_\_\_\_
10. Date that plans and this request for a Program Grant were reviewed by the District Superintendent?  
\_\_\_\_\_
11. What group in your church will be in charge of supervision and evaluation of the program? \_\_\_\_\_

Signed \_\_\_\_\_  
Pastor Phone

Signed \_\_\_\_\_  
Officer of Church Phone

Signed \_\_\_\_\_  
District Superintendent Phone

Date signed \_\_\_\_\_

**Mail to:**

Office of Connectional Ministries  
P. O. Box 850  
Alcoa, TN 37701-0850