

# **TRENT-DURHAM AREA COUNCIL GRANT APPLICATION**

Parish Name \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_

## **I THE MISSION AND MINISTRY OF THE PARISH**

1. Please indicate which of the following ministry area(s) you are applying under:

**Outreach**  
**Congregational Development/Growth/Evangelism**  
**Nurturing Healthy Parishes**  
**Stewardship**  
**Pastoral Care/Visitation**  
**Youth**

(If none of these apply to your situation, please indicate why. If there are other areas of ministry not listed, please add.)

*Please include the following information:*

2. Describe the project/program, including:
  - a. Purpose
  - b. Ministry plan
  - c. Resources required (human, physical, financial)
  - d. Resources available in the parish; deanery (or other);
  - e. Grant requested.
3. What is currently being accomplished locally and otherwise in this ministry area?
4. What are the obstacles that currently inhibit you from moving forward with this project/program?
5. What indicators will you use to measure progress for this project/program?

## **II THE PASTORAL PLAN**

1. Describe the social and demographic nature of the community in which the parish/congregation resides (population, cultural component, rural/urban, social needs, growth potential).
2. Describe the parish/congregation (membership size, Sunday attendance, age groupings, growth potential, number of active committees/groups, worship style and pattern), if applicable.
3. If this application is based on an area or deanery event, please indicate the scope of the event, who would be attendees, and how the church will benefit from it.

## **III THE FINANCIAL PLAN**

1. List reasons explaining why the parish/congregation is applying for a grant for this program/project. Please include a copy of parish financial statement to date and budget for the program requested.
2. What specific plans are in place to move you toward self-sufficiency during the coming year?

**TRENT-DURHAM AREA COUNCIL GRANT APPLICATION INFORMATION FORM**

Name of Parish/Congregation: \_\_\_\_\_

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

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

Telephone Numbers - Office: ( ) \_\_\_\_\_ Home: ( ) \_\_\_\_\_

Name of Incumbent/Priest-in-Charge: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_

If a grant is rewarded, the cheque should be addressed to: \_\_\_\_\_

What address should the cheque be sent to if different from above?:

\_\_\_\_\_

**Summary of Total grants given by the Area to Date:**

	<b>2015 Actual</b>	<b>2016 Actual</b>	<b>2017 Request</b>
<i>Individual Year Grants</i>	_____	_____	_____
<i>or</i>			
<i>Multiple Year Grants</i>	_____	_____	_____

***We, the Incumbent and Churchwardens, have seen this grant application, approve this application and agree that financial information and budgets provided are accurate and correct for this project or program.***

**Signatures:**

(Churchwarden) \_\_\_\_\_ (Churchwarden) \_\_\_\_\_

(Incumbent) \_\_\_\_\_

**Completion check list:**

1. All questions are answered.
2. A copy of your financial statements and budget for the project or program are included with this application.
3. This page has been signed by the incumbent and churchwardens.
4. A copy of this application has been sent to your Regional Dean and you have talked to them.
5. Return this application by email to: [ghumphreys@toronto.anglican.ca](mailto:ghumphreys@toronto.anglican.ca)  
or by mail to: Trent Durham Bishop's Office, 965 Dundas Street West, Suite 207, Whitby, ON L1P 1G8.

***(For Bishop's Use Only)***

**Date Application Received:** \_\_\_\_\_

**Comments:**

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**Recommendations:**

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**Grant Approval amount for 2017:** \_\_\_\_\_

**Date Decision Sent to the Parish/Congregation:** \_\_\_\_\_