

**Office of Mission Program Grants**  
Presbyterian Church (USA)  
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## GENERAL ASSEMBLY MISSION PROGRAM GRANT SPECIALIZED MINISTRY GRANT APPLICATION

Date Prepared \_\_\_\_\_

Synod \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ E-mail Address \_\_\_\_\_

Presbytery \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ E-mail Address \_\_\_\_\_

Project Name \_\_\_\_\_

Pastor / Project Director \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_ Phone \_\_\_\_\_

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**DEFINITION:** A specialized ministry is a project in which a ministry sponsored by the presbytery, group of congregations, or a congregation is designed to meet the physical, social, spiritual, or justice/evangelism needs of the community of peoples primarily outside of the congregation.

**GRANT PERIOD:** Realizing that some projects desire a shorter or longer funding period, funding may be spread over a period of 3-7 years.

**INSTRUCTIONS:** Send a computer diskette and twenty copies of this application copied two-sided on white paper with required attachments to the Mission Program Grant Office in accordance with the attached submission dates. This form is available in Microsoft Word format and may be obtained by downloading from the Mission Program Grants office section of the Evangelism and Church Development web site [www.pcusa.org/evangelism/churchdevelopment/mpgrants.htm](http://www.pcusa.org/evangelism/churchdevelopment/mpgrants.htm), by e-mail or on a diskette.

In narrative form, please respond to the following.

1. **Vision:** Describe the vision for the project.
2. **Staffing Rationale:** Describe the qualities you will seek in a project leader to carry out your proposed ministry plan. Include a position description for each staff member to be funded by this grant.
3. **Demographic Study:** Include a summary of the demographic study, not to exceed one page, which provides relevant findings such as ecumenical and mission opportunities, racial ethnic population, age distribution, and economic strength. Describe the need the project will meet.
4. **Ministry Plan:** List the goals and objectives for the project and the method for establishing, building up, and maintaining the new project. Include measurable goals and objectives for the first year.
5. **Attendance:** List the realistic estimates of the number of people to be served each year by this project. Give data to support your estimates.
6. **Income and Expense Budget:** Display itemized and balanced *operating* income and expense budgets for each year of the grant. Capital expenses should be excluded. Include income amounts from General Assembly, synod, presbytery, congregation, project and other sources. Please include last year's financial statement, if available, showing the budgeted and actual income/expenditures.
7. **Oversight of Project:** Describe how your presbytery and/or congregation(s) will provide oversight, encouragement and regular contact with the leadership of this project.

8. **Funding Schedule:** Complete the following display of scheduled proposed Mission Program Grant funding to support the specialized ministry project. Place an asterisk (\*) after specific amount to indicate that action has been taken to approve the grant and the specified amount.

**SCHEDULE OF PROPOSED MISSION PROGRAM GRANT FUNDING**

- A. Anticipated date that the monthly payment is expected to begin. \_\_\_\_\_
- B. Anticipated final year of mission program grant. \_\_\_\_\_

	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>	<u>Year 5</u>	<u>Year 6</u>	<u>Year 7</u>	<u>TOTAL</u>
PROJECT	_____	_____	_____	_____	_____	_____	_____	_____
PRESBY.	_____	_____	_____	_____	_____	_____	_____	_____
SYNOD	_____	_____	_____	_____	_____	_____	_____	_____
GA	_____	_____	_____	_____	_____	_____	_____	_____
OTHER	_____	_____	_____	_____	_____	_____	_____	_____
TOTAL	_____	_____	_____	_____	_____	_____	_____	_____

**NOTE: The Mission Program Grant shall not exceed the combined funding amount provided by the presbytery and/or synod and may be less during the funding life of the grant. Mission Program Grants are scheduled on a declining scale.**

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Please refer to the *Mission Program Grant Proposal Checklist* contained within *Grant Writing 101* for general evaluation criteria.

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Middle Governing Bodies participating and giving oversight and assistance to this project, please sign below and provide helpful information as appropriate.

At the \_\_\_\_\_ (date) meeting of the Presbytery of \_\_\_\_\_, the foregoing specialized ministry plan and program grant application were reviewed and approved by the mission strategy body of this presbytery as fulfilling the criteria and guidelines governing GA Mission Program Grants.

\_\_\_\_\_  
General / Executive Presbyter or designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Synod Executive or designee